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Reality stars who did it show you how

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Bethenny Frankel

"I'm completely done with women being rewarded for bad behavior"

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”

ALISON SWEENEY
*Host of The Biggest Loser
and author of
The Mommy Diet*

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Hand her over. We.
Want. To. Eat. Her.



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Bethenny Frankel, Alison Sweeney, and Padma Lakshmi photographed exclusively for REDBOOK by Gilles Bensimon. Stylists: Kemal & Karla at The Wall Group. Bethenny and Alison's hair: Alberto Guzman for Tresemme at Raybrownpro.com. Padma's hair: Jutta Weis at Lori-Hamlin. Bethenny and Alison's makeup: Cynthia Sobek at See Management using Avenue Skincare and Dior Cosmetics. Padma's makeup: Kristofer Buckle at The Wall Group. Bethenny and Padma's manicure: Olya Titova for Sephora by OPI at Judy Casey Inc. Alison's manicure: Sophia Shusterov for Mac Pro at Judy Casey Inc. Get these cover looks with makeup by CoverGirl and hair care by Pantene. See shopping guide, last pages, for clothing, makeup, and hair care details.

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Stop looking
so sad and
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Here's
how.



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3



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NOW

5 secrets of our January issue

Here are a few pet names REDBOOK staffers have for their bellies: Jelly Roll, Burrito Baby, 'Roo Pouch (as in kangaroo), Chummy (chub + tummy), It (as in "God help me, I think It has gotten bigger!"), Michelin (the feminine of Michelin Man), and just plain Susan, "So it's more like having a friend around." I like that last one best, because too many women think of their belly as the enemy. Of course, there are compelling health reasons to lose extra weight around the middle: Studies show that women with a waist larger than 34.5 inches around have more than twice the risk of coronary heart disease as those with smaller waists. And belly fat poses a greater threat to your overall health than extra weight carried in your hips, butt, or thighs. Okay, okay! We got the message, and that's why we focused on the tummy in our January weight-loss package (page 114).



But before we go to work on our abs, let's appreciate everything they go through, especially during pregnancy. All three of our cover girls—Bethenny Frankel, Alison Sweeney, and Padma Lakshmi—have had babies in the past few years. True, it's slightly annoying how flat their bellies are now, but because they're reality stars, the world got to see them at their roundest during and after pregnancy. And their interviews make it clear: A few stretch marks are a small price to pay for the soul-deep satisfactions of motherhood.

Listen, I am not immune to belly woe. I'll never forget going to the beach a few months after having my first baby, bending over to straighten my towel and thinking, *What is that? Why is it wobbling back and forth? What can be done?* Well, crunches helped, and the great new moves in this issue will help, but there will always be a little extra left over from having kids. I was talking recently to Lisa Hintelmann, the editorial projects director at our brother magazine, *Esquire*, and she had this to say: "One thing I've discovered working with all these men at *Esquire* is that they tend to prefer 'women of substance,' both physically and intellectually. They're disappointed when we go to shoot an actress and she's lost weight!" It turns out that a little belly is sexy—so I'm making friends with mine, and I'm naming it Marilyn (as in Monroe).

Try it: the side plank



Jill

Jill Herzig, Editor-in-Chief
Redbooked@hearst.com

SECRET #1

Our writers don't hold back

This issue is full of extreme honesty: Darci Picoult talks about dealing with vulvar cancer (page 136), Aaron Traister tells you what he's never told his wife (page 78), and Virginia Heffernan reveals her obsession with online infidelity (page 86). Why did they put it all out there? To connect with you. "I wanted to help another woman who may be facing the same ordeal," Darci told me, "and to find a way to talk about intimacy beyond sex."



Darci Picoult



Aaron Traister



Virginia Heffernan

SECRET #2

We're on a get-fit kick too

This month our staffers attempted Alison Sweeney's "shape-up week," working out as much as possible (including side planks at the office!) and eating right for seven days straight. Find out how they did on page 17.

7 days of style

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EXCLUSIVELY AT

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“If it doesn't go with black pants, I don't own it. My motto: You can never be too rich or own too many black pants. I consider khaki bold. I'd have a great wardrobe...if I were a hostess. It's not that I don't love style; I just lack courage and need help when it comes to my clothes.”

—Laura Alexoff, Ohio



As the winner of the Liz Claiborne “7 Days of Style” Contest, Laura Alexoff's black-and-white wardrobe will go from ho-hum to in-fashion, thanks to the experts at JCPenney and Liz Claiborne. Is your wardrobe in need of a makeover? Let Laura be your inspiration!

Like Laura, you can gradually integrate color and patterns into your wardrobe with these 7 style finds guaranteed to keep you looking your best—every day of the week.

- 1 Accent your black-and-white basics with a bright-colored timeless trench coat.
- 2 Pick a classic item—such as a button-down blouse—and opt for a print or pattern.
- 3 A denim tunic adds major versatility and subtle color to any wardrobe.
- 4 Add flair (and a splash of color) with chunky accessories.
- 5 Take a fashionable escape from your all-black ensemble with the Audra Slim-Fitting Khaki Pant.
- 6 Substitute your basic black handbag with a more vibrant hue.
- 7 Top off your favorite bottoms with a colored henley, perfect for layering.

JCPenney

Featured items will be available in JCPenney stores and on www.jcp.com beginning December 21.

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EDITOR'S NOTEBOOK

Our cover girls showed a whole
new side at their photo shoots!



SECRET #3

Padma has a great
plan B: jewelry design

It looks like this *Top Chef*
thing is working out fine, but
Padma designs some of the
world's most beautiful jewelry
on the side. Every piece she
wore on the cover, and the
necklace at right, is hers. See
more at padmalakshmi.com.



SECRET #4

Bethenny is brave

At our shoot, Bethenny cut her
foot—badly. How did she handle
it? “It connects to my next book,
A Place of Yes,” she told us. “So,
you slice half your toe off at a shoot
and the photographer says, ‘We’d
like to do one last dress.’ You say
‘Yes’ because you have to plow
through things to make other things
happen.” Hard-core, but helpful!



SECRET #5

Alison sizzles

This girl is seriously sexy
in front of the camera.
She loved the photos
Gilles Bensimon took
so much, she emailed
them to her hubby in
Los Angeles, straight
from the set.

*Thanks for
the free trip,
Ali!*



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you with our One Stop Shop app. Just tap the item and get your info.



EDITORS NOTE

An article entitled “Invisible Violence” (October 2008 *Redbook*) presented the personal experiences of three women who claimed to be victims of emotional abuse. After the article appeared, questions were raised about the truth of some of the claims in the article. To be clear, the article was not intended to resolve the claims of these women or pass judgment on the men involved. We recognize that these situations are often viewed differently by those involved and apologize to the extent that the article could be read to condemn the men who were mentioned.

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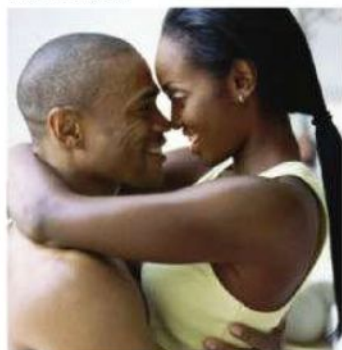


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JANUARY'S CLICK LIST

Have hotter sex this year

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Here's a resolution way more fun than kicking caffeine: Check out our 12 tips for turning him on, heating things up, and snagging some grown-up alone time. (Hint: Start DVR-ing Dora ASAP.)

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HAVING A "MOM MOMENT" TODAY?

So is Alice Bradley. Read the Finslippy writer's great new blog on redbookmag.com/mom moment to hear what's making her laugh, what's making her hair turn gray, and the latest juicy gossip from all around the Web.



REDBOOK'S HOT HUSBAND OF THE MONTH

Name: Scott Battishill, 40, Tacoma, WA

Job: Owner of a public relations firm in Seattle

Family: Married 16 years; father to Julia, 11, and Jackson, 6

Okay, seriously: Where can we get one like Scott? "He's so giving," says his wife, Wendy. "He makes a point to have one-on-one time with our daughter, even if it's to take her to the ballet, where all the other girls are with their moms. He also spent a weekend building a birdhouse with our son." Wendy gets her share too: "I mentioned that we really needed a date night, and the next day I got an email from him that the kids had a sitter and we were going to a Picasso exhibit and out to dinner." One last "Aww!" detail: "He comes home on January 11 every year with a surprise, and I can never remember why. Then he reminds me—it's the anniversary of the day we first met, in the common room of our college dorm."

Want to see your guy in this spot? Tell us all about him at redbookmag/hothusband—and enter to win our America's Hottest Husband contest.

SYMBICORT is for asthma that is not well controlled on a long-term asthma medicine, or when disease severity warrants

My asthma... under control with the help of **SYMBICORT**.

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SYMBICORT helps me breathe better all day, starting within 15 minutes.* It won't replace a rescue inhaler for sudden symptoms. Unlike most other asthma medicines, SYMBICORT combines two medicines to help control inflammation and constriction.

* Your results may vary.

Ask your doctor if SYMBICORT is a good choice for you.

IMPORTANT INFORMATION ABOUT SYMBICORT

Important Safety Information About SYMBICORT for Asthma

SYMBICORT contains formoterol, a long-acting beta₂-adrenergic agonist (LABA). LABA medicines such as formoterol increase the risk of death from asthma problems. It is not known whether budesonide, the other medicine in SYMBICORT, reduces the risk of death from asthma problems seen with formoterol.

SYMBICORT should be used only if your healthcare provider decides that your asthma is not well controlled with a long-term asthma control medicine, such as an inhaled corticosteroid, or that your asthma is severe enough to begin treatment with SYMBICORT.

If you are taking SYMBICORT, see your healthcare provider if your asthma does not improve or gets worse. It is important that your healthcare provider assess your asthma control on a regular basis. Your doctor will decide if it is possible for you to stop taking SYMBICORT and start taking a long-term asthma control medicine without loss of asthma control.

SYMBICORT does not replace rescue inhalers for sudden asthma symptoms. Be sure to tell your healthcare provider about all your health conditions, including heart conditions or high blood pressure, and all medicines you may be taking. Some patients taking SYMBICORT may experience increased blood pressure, heart rate, or change in heart rhythm.

Do not use SYMBICORT more often than prescribed. While taking SYMBICORT, never use another medicine containing a LABA for any reason. Ask your healthcare provider or pharmacist if any of your other medicines are LABA medicines, as using too much LABA may cause chest pain, increase in blood pressure, fast and irregular heartbeat, headache, tremor, and nervousness.

Patients taking SYMBICORT

- may experience serious allergic reactions including rash, hives, swelling of the face, mouth and tongue, and breathing problems.
- may have a higher chance of infection. Tell your healthcare provider immediately if you think you are exposed to infections such as chicken pox or measles, or if you have any signs of infection.
- may experience an increase in wheezing right after taking SYMBICORT, eye problems including glaucoma and cataracts, decreases in bone mineral density, swelling of blood vessels, decrease in blood potassium and increase in blood sugar levels.

If you are switching to SYMBICORT from an oral corticosteroid, follow your healthcare provider's instructions to avoid serious health risks when you stop using oral corticosteroids.

Children and adolescents who take LABA medicines may have an increased risk of being hospitalized for asthma problems.

Common side effects include nose and throat irritation, headache, upper respiratory tract infection, sore throat, sinusitis, stomach discomfort, flu, back pain, nasal congestion, vomiting, and thrush in the mouth and throat.

Approved Uses for SYMBICORT for Asthma

SYMBICORT is used to control and prevent symptoms of asthma in adults and children ages 12 and older. SYMBICORT is not for patients who have sudden asthma symptoms.

Please see Important Product Information on adjacent page and discuss with your doctor.

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IMPORTANT INFORMATION ABOUT SYMBICORT

Please read this summary carefully and then ask your doctor about SYMBICORT.

No advertisement can provide all the information needed to determine if a drug is right for you or take the place of careful discussions with your health care provider. Only your health care provider has the training to weigh the risks and benefits of a prescription drug.

WHAT IS THE MOST IMPORTANT INFORMATION I SHOULD KNOW ABOUT SYMBICORT?

People with asthma who take long-acting beta₂-agonist (LABA) medicines, such as formoterol (one of the medicines in SYMBICORT), have an increased risk of death from asthma problems. It is not known whether budesonide, the other medicine in SYMBICORT, reduces the risk of death from asthma problems seen with formoterol.

SYMBICORT should be used only if your health care provider decides that your asthma is not well controlled with a long-term asthma control medicine, such as an inhaled corticosteroid, or that your asthma is severe enough to begin treatment with SYMBICORT. Talk with your health care provider about this risk and the benefits of treating your asthma with SYMBICORT.

If you are taking SYMBICORT, see your health care provider if your asthma does not improve or gets worse. It is important that your health care provider assess your asthma control on a regular basis. Your doctor will decide if it is possible for you to stop taking SYMBICORT and start taking a long-term asthma control medicine without loss of asthma control.

Get emergency medical care if:

- breathing problems worsen quickly, and
- you use your rescue inhaler medicine, but it does not relieve your breathing problems.

Children and adolescents who take LABA medicines may be at increased risk of being hospitalized for asthma problems.

WHAT IS SYMBICORT?

SYMBICORT is an inhaled prescription medicine used for asthma and chronic obstructive pulmonary disease (COPD). It contains two medicines:

- Budesonide (the same medicine found in Pulmicort Flexhaler™, an inhaled corticosteroid). Inhaled corticosteroids help to decrease inflammation in the lungs. Inflammation in the lungs can lead to asthma symptoms.
- Formoterol (the same medicine found in Foradil® Aerolizer®). LABA medicines are used in patients with COPD and asthma to help the muscles in the airways of your lungs stay relaxed to prevent asthma symptoms, such as wheezing and shortness of breath. These symptoms can happen when the muscles in the airways tighten. This makes it hard to breathe, which, in severe cases, can cause breathing to stop completely if not treated right away.

SYMBICORT is used for asthma and chronic obstructive pulmonary disease as follows:

Asthma

SYMBICORT is used to control symptoms of asthma and prevent symptoms such as wheezing in adults and children ages 12 and older.

Chronic Obstructive Pulmonary Disease

COPD is a chronic lung disease that includes chronic bronchitis, emphysema, or both. SYMBICORT 160/4.5 mcg is used long term, two times each day, to help improve lung function for better breathing in adults with COPD.

WHO SHOULD NOT USE SYMBICORT?

Do not use SYMBICORT to treat sudden severe symptoms of asthma or COPD or if you are allergic to any of the ingredients in SYMBICORT.

WHAT SHOULD I TELL MY HEALTH CARE PROVIDER BEFORE USING SYMBICORT?

Tell your health care provider about all of your health conditions, including if you:

- have heart problems
- have high blood pressure
- have seizures
- have thyroid problems
- have diabetes
- have liver problems
- have osteoporosis
- have an immune system problem
- have eye problems such as increased pressure in the eye, glaucoma, or cataracts
- are allergic to any medicines
- are exposed to chicken pox or measles
- are pregnant or planning to become pregnant. It is not known if SYMBICORT may harm your unborn baby
- are breast-feeding. Budesonide, one of the active ingredients in SYMBICORT, passes into breast milk. You and your health care provider should decide if you will take SYMBICORT while breast-feeding.

Tell your health care provider about all the medicines you take including prescription and nonprescription medicines, vitamins, and herbal supplements. SYMBICORT and certain other medicines may interact with each other and can cause serious side effects. Know all the medicines you take. Keep a list and show it to your health care provider and pharmacist each time you get a new medicine.

HOW DO I USE SYMBICORT?

Do not use SYMBICORT unless your health care provider has taught you and you understand everything. Ask your health care provider or pharmacist if you have any questions.

Use SYMBICORT exactly as prescribed. Do not use SYMBICORT more often than prescribed. SYMBICORT comes in two strengths for asthma: 80/4.5 mcg and 160/4.5 mcg. Your health care provider will prescribe the strength that is best for you. SYMBICORT 160/4.5 mcg is the approved dosage for COPD.

- SYMBICORT should be taken every day as 2 puffs in the morning and 2 puffs in the evening.
- Rinse your mouth with water and spit the water out after each dose (2 puffs) of SYMBICORT. This will help lessen the chance of getting a fungus infection (thrush) in the mouth and throat.
- Do not spray SYMBICORT in your eyes. If you accidentally get SYMBICORT in your eyes, rinse your eyes with water. If redness or irritation persists, call your health care provider.
- Do not change or stop any medicines used to control or treat your breathing problems. Your health care provider will change your medicines as needed.
- While you are using SYMBICORT 2 times each day, do not use other medicines that contain a long-acting beta₂-agonist (LABA) for any reason. Ask your health care provider or pharmacist if any of your other medicines are LABA medicines.
- SYMBICORT does not relieve sudden symptoms. Always have a rescue inhaler medicine with you to treat sudden symptoms. If you do not have a rescue inhaler, call your health care provider to have one prescribed for you.

Call your health care provider or get medical care right away if:

- your breathing problems worsen with SYMBICORT
- you need to use your rescue inhaler medicine more often than usual
- your rescue inhaler does not work as well for you at relieving symptoms
- you need to use 4 or more inhalations of your rescue inhaler medicine for 2 or more days in a row
- you use one whole canister of your rescue inhaler medicine in 8 weeks' time
- your peak flow meter results decrease. Your health care provider will tell you the numbers that are right for you
- your symptoms do not improve after using SYMBICORT regularly for 1 week

WHAT MEDICATIONS SHOULD I NOT TAKE WHEN USING SYMBICORT?

While you are using SYMBICORT, do not use other medicines that contain a long-acting beta₂-agonist (LABA) for any reason, such as:

- Serevent® Diskus® (salmeterol xinafoate inhalation powder)
- Advair Diskus® or Advair® HFA (fluticasone propionate and salmeterol)
- Formoterol-containing products such as Foradil® Aerolizer®, Brovana®, or Perforomist®

WHAT ARE THE POSSIBLE SIDE EFFECTS WITH SYMBICORT?

SYMBICORT can cause serious side effects.

- Increased risk of pneumonia and other lower respiratory tract infections if you have COPD. Call your health care provider if you notice any of these symptoms: increase in mucus production, change in mucus color, fever, chills, increased cough, increased breathing problems
- Serious allergic reactions including rash; hives; swelling of the face, mouth and tongue; and breathing problems. Call your health care provider or get emergency care if you get any of these symptoms
- Immune system effects and a higher chance for infections
- Adrenal insufficiency—a condition in which the adrenal glands do not make enough steroid hormones
- Cardiovascular and central nervous system effects of LABAs, such as chest pain, increased blood pressure, fast or irregular heartbeat, tremor, or nervousness
- Increased wheezing right after taking SYMBICORT
- Eye problems, including glaucoma and cataracts. You should have regular eye exams while using SYMBICORT
- Osteoporosis. People at risk for increased bone loss may have a greater risk with SYMBICORT
- Slowed growth in children. As a result, growth should be carefully monitored
- Swelling of your blood vessels. This can happen in people with asthma
- Decreases in blood potassium levels and increases in blood sugar levels

WHAT ARE COMMON SIDE EFFECTS OF SYMBICORT?

Patients with Asthma

Sore throat, headache, upper respiratory tract infection, thrush in the mouth and throat

Patients with COPD

Thrush in the mouth and throat

These are not all the side effects with SYMBICORT. Ask your health care provider or pharmacist for more information.

NOTE: This summary provides important information about SYMBICORT. For more information, please ask your doctor or health care provider.

SYMBICORT is a registered trademark of the AstraZeneca group of companies. Other brands mentioned are trademarks of their respective owners and are not trademarks of the AstraZeneca group of companies. The makers of these brands are not affiliated with and do not endorse AstraZeneca or its products.

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Visit www.MySymbicort.com
Or, call 1-866-SYMBICORT

Symbicort®
(budesonide/formoterol fumarate dihydrate)
Inhalation Aerosol

AstraZeneca



This month's **STAFF CHALLENGE**: To try Alison Sweeney's "shape up week" (see page 114). Did we manage to work out and eat right for seven straight days? Ladies?

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"After exercising seven days in a row, I felt so good it was like I was tipsy!"
—SUNNY

"Except for the one day I had a salad, my shape-up week was a total fail. Um, whoops!"
—CAITLIN

"I cut out alcohol and felt so much better. So, no more happy hours! Well... let's say fewer."
—LAUREL

"I went to the gym at lunch and was attracted to healthier choices for the rest of the day. Why would I want to ruin all of my hard work?!"
—CHELSEA

"I did three days of hot yoga. It felt like a treat—a combo of 'me' time, a workout, and some truly great pampering."
—JANE



THANKS, WHYS GUY!

Your article about how we women look at ourselves in the mirror and how guys look at themselves ["Love Your Whole Body (Hey, He Loves His)," November] was the most romantic thing I've read in a long time. Thank you for restoring for me the fact that men connect with women on a deeper level than I give them credit for, even if it is in their own "guy" way. —KATHY MATTSON, *Weston, FL*

ADOPTION HONESTY

Thank you for the article on adoption ["What Every Woman Should Know About Adoption," November]. I especially enjoyed the sidebar on what to say and what not to say to adoptive parents. We adopted our oldest son, Zach, as an infant. He is now 21 and incarcerated on a drug-related charge. We are heartbroken, but he is our son and we love him, period. Recently, an acquaintance said, "Boy, I bet you are sorry you adopted Zach." I was speechless, and when I found my voice I was able to tell her that I'm not sorry for a moment that Zach is our son. He has brought us unimaginable joy and love. He made a mistake that will impact him for many years, but we will be there for him no matter what. —CANDACE WEBSTER, *Harleysville, PA*

I was discouraged to see that your list of "What Every Woman Should Know About Adoption" left out any

"I love Katherine Heigl—she's a great actress and a very passionate, caring person."

information for expectant mothers considering giving their child up for adoption. Excluding birth parents altogether made it seem like their importance is minimal, but the reality is that when birth mothers are better informed, adoptive parents and children have the best chance at a smooth transition. I hope next time you'll include information about *both* sides of adoption. —JENNA HATFIELD, *Cambridge, OH*

I love Katherine Heigl ["The Girl Who Changed Her Life," November] as an actress but didn't understand why she chose to adopt. Now that I've read this article, it makes sense. She's a great actress and a very passionate, caring person. —MELISSA BURNS, *Helena, MT*

IT'S A PROBLEM... PERIOD!

Thanks to REDBOOK and Dr. Hilda Hutcherson for the article about period issues ["What's Up With Your Period?" November]. I've had two miserable months with many of the symptoms mentioned in the article. I was so relieved to know that other women have the same problems! I have an appointment with my ob/gyn, and I'm bringing my copy of REDBOOK so I'll be armed with the names of the tests Dr. Hutcherson

mentioned. I'm so much calmer now—thanks for the peace of mind! —PATTY MCGREGOR, *Beverly, MA*

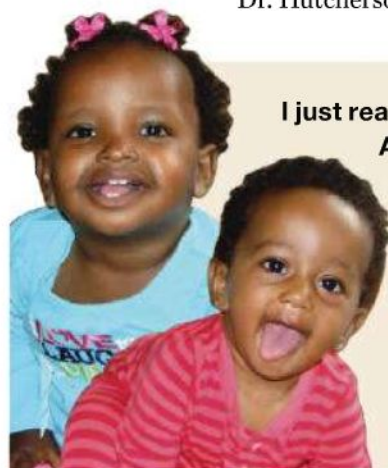
SAVINGS AND GROANS

I simply cannot thank you enough for "Living Large on \$66,000" [November]. We had no idea that HARP [the Home Affordable Refinance Program] existed before I read it, and we immediately called our bank and qualified. We went from a 6.25 percent rate to an unbelievable 4.5 percent rate! This saves us \$300 per month, and now we can finally afford a car payment. Thank you so much for printing articles like this one. —SUSAN WRIGHT, *Lakeville, MN*

Please tell me this story ["Living Large on \$66,000"] is a misprint. Surely you realize that huge numbers of your readers would think they were in heaven if they had an income half of what this couple has. —DIANE BONDIOLI, *Prairieville, LA*

SHOUT IT OUT

I was so glad to know that I'm not the only one who feels guilty about yelling all the time ["Could You Go a Week Without Yelling?" November]. I want to have a calmer household, and I truly believe it needs to start with me. Thanks for the enlightening story! —JENNIFER MCCARDEL, *Weirton, WV*



I just read "What Every Woman Should Know About Adoption" [November]. We

recently adopted two of the most beautiful little gals (left) from Ethiopia, and I was thrilled that you encouraged people to adopt! It was the most painful, wonderful, and amazing journey we have ever had. Keep doing articles like this—so many kids need families. —SHELLEY THOMSEN, *Andover, MN*



The FDA has approved one, and only one.

alli is the only over-the-counter weight loss aid with FDA approval, unlike the many dizzying pills in the diet category. Used by millions to lose weight safely, alli works in your digestive tract and doesn't affect your head or heart. It simply blocks about 25% of the fat you eat from being absorbed, without being a stimulant or appetite suppressant. That means, when you put in the hard work to lose two pounds by eating right and exercising, alli can actually help you lose one more extra pound. Plus, alli's free personalized online support plan was developed with scientifically proven tools to help you achieve and maintain a healthier weight.

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Turns your idea of what a pad can do upside down too. With its amazingly absorbent, unbelievably flexible core, Always Infinity® adapts more and absorbs more than Kotex® Ultra Thin Regular.* Which is definitely something worth flipping for. **Just like magic. Have a happy period.**



*Always Infinity adapts more and absorbs more than Kotex Ultra Thin Regular. Claim based on a 2010 test conducted by P&G Research & Development. ©2010 P&G

THIS DOESN'T QUITE ADD UP...

Are there more TVs than people in your home?



... let's just hope you're not all watching the same show in different rooms.

SPILL VENT GOSSIP GO!

EVERYTHING
YOU CAN'T STOP
TALKING ABOUT
RIGHT NOW

WE WON'T JUDGE!

WHO IS YOUR WEIRDEST CELEBRITY CRUSH?



◀ **Michael Caine**

"I love him—and I'm only 32!"
—VANESSA BOWIE, DENVER

Marilyn Manson ▶



"At the height of his popularity, I was in lust with him. Everyone thought I was mad!"
—BRANDIE JOHNSON, LAWRENCE, KS



◀ **Steve from
Blue's Clues**

"I was just as upset as my kids when he left the show."
—KIMBERLY TORREY BOURSIER, MAPLE GROVE, MN

DO YOU KISS YOUR GUY WHEN HE HAS A COLD?

59% of you said...

YES



Gimme a smooch!

"If he's sick, then it's already too late for me. Bring on the lips!"
—DIANA KAMROWSKI SCHLAFFER, MINNEAPOLIS

SAY CHEESE...

J. Lo's kids aren't even 3 and they're shilling for Gucci's children's line.

WOULD YOU LET YOUR CHILD MODEL?

Why not? It could be fun!

70%

Sure, if we really needed the money

12%

Not if I had to boil my own shoe to eat

18%



GETTING HITCHED

So Prince William **finally** popped the question. Would **you** say yes to a life of royal shindigs, big hats, and crazy paparazzi? Of course, you'd **never** have to worry about cooking, cleaning, or cash again. Oh, and you'd get to be **queen!**

WOW, THAT WAS EMBARRASSING!

"I was interrogating my soon-to-be husband the night he came home from his bachelor party and wondering who the young blonde girl on his T-shirt was. Having had a few drinks, he wasn't following my line of questioning, so I kept asking him the same thing, louder and louder: 'Who's the girl on your shirt? Some ex-girlfriend? Who is she? WHO'S THE GIRL?!' Finally he answered: 'It's me. Can we go to bed now?' His friends had made T-shirts of an old portrait of him as a preteen.

What can I say? He was pretty."

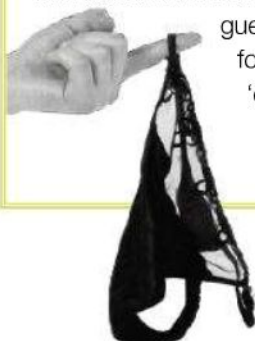
—M.D., MYSTIC, CT

"I had just returned home from a very indulgent 10-day vacation, on which I had, of course, gained a little weight. A few days later, I was getting dressed and noticed that my jeans were very snug and uncomfortable. I spent the entire day tugging at them, until my teenage son came home and asked me why I was **wearing his pants**. I had accidentally put his jeans in my closet when I unpacked!" —A.M., THOMASVILLE, GA

"A few weeks after my husband and I had visited his parents for Christmas, I got a package in the mail from his mother. Turns out, **it was my underwear**, and she included a note saying that she had found them in the sheets of the

guest bed. I guess she found out how we 'exchanged gifts' on Christmas Eve!"

—R.C., TUCSON, AZ



59%

Sign me up—it's a fairy tale!

41%

No, thanks—that sounds like a nightmare.



GUN SHOW

Let's say you could get **ARMS LIKE MADONNA'S** from working out at her new Hard Candy gyms. Would you even want them?

I'LL PASS

49%

I'D TAKE THEM—SHE'S RIPPED!

51%



REDBOOKMAG.COM READERS CONFESS

YOU SPEND 13 HOURS a week checking FACEBOOK

on average, and a dedicated 57 percent of you say that you check in with the social-networking site every single day.

NEAR OR FAR?

WOULD YOU EVER HAVE A LONG-DISTANCE MARRIAGE?



Amy Poehler films *Parks and Recreation* on the West Coast while husband Will Arnett films *Running Wilde* in New York.



If it were necessary for professional reasons

35%

Absolutely not. I want my honey in the house!

43%

Long-distance marriage? We already have/had one!

22%

7 **BLOGGER SOUND-OFF** THINGS **NEVER** TO SAY TO... A PREGNANT WOMAN

You're big. You're hormonal. And after childbirth, your hoo-hah may never be the same. So why do people aim the nastiest comments at pregnant women? Blogger Eden Kennedy of fussy.org got her loyal Twitter followers to spill the most cringe-worthy things moms-to-be have ever heard.

"I hope you're not one of those women who uses pregnancy as an excuse to get really, really fat."

"Giving birth was awful—the most traumatic experience of my life. You'll hate it too."

"Whoa! Have you got two of them in there?"

"Women having girls are beautiful and radiant. I can tell you are having a boy."

"Why are you being such a bitch about cold cuts?" [And this was during a listeriosis scare!]

"If you put on a track suit and some gold chains, you'd look like one of Tony Soprano's friends."

"I understand, I was an ugly pregnant person too."

Introducing

OWN

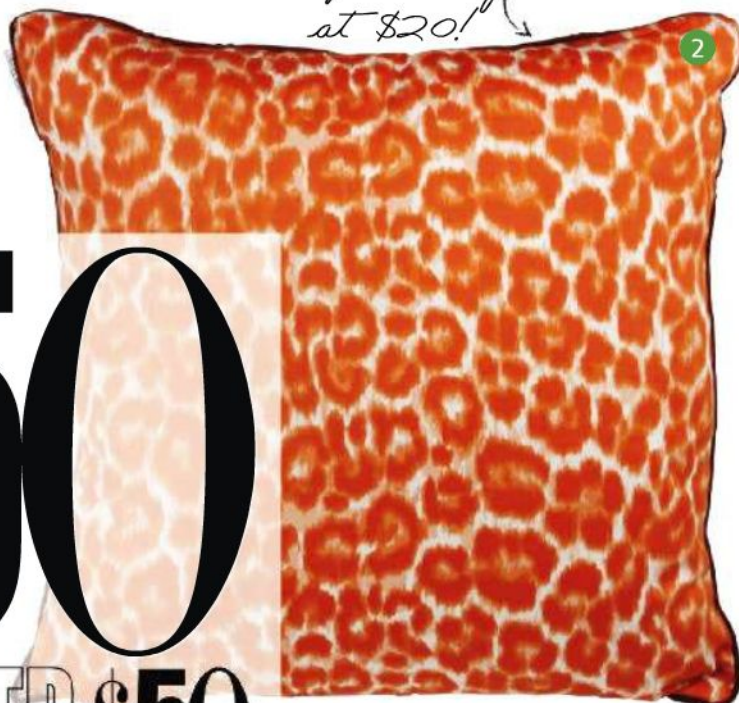
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Launching January 1st

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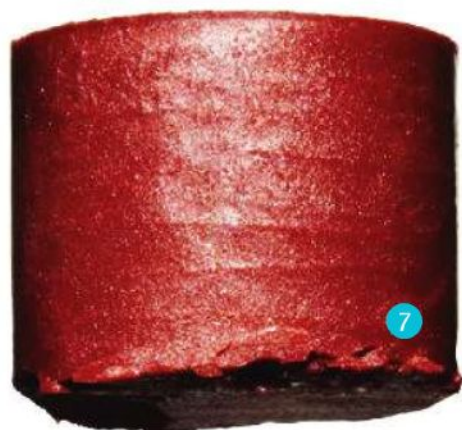
*Designer style
at \$20!*



50

UNDER \$50

WHETHER YOU **BUNDLE UP** OR **STAY IN**, THESE FINDS WILL TAKE THE BITE OUT OF **WINTER** (AND WON'T EAT INTO YOUR SAVINGS). PLUS: **AMAZING FREEBIES!**



1 This isn't just a ponytail holder. It's a full-on *hairstyle*. L. Erickson Burst ponytail holder, \$34; franceluxe.com. 2 Walk on the wild side—very, very elegantly—with a leopard-print pillow. IsaacMizrahiLive! pillow, \$20; qvc.com. 3 Pin it on your my-office-is-freezing sweater for a burst of instant chic. Dahlia pin, \$26; momastore.org. 4 A beautiful blue bangle brightens up any standard-issue outfit. Grace bracelet, \$35; towneandreese.com. 5 So brilliant: A tote that makes hunting for your car keys a warm-and-cozy experience. Snuggle tote, \$30; shop4sparkles.com. 6 Look glam while blocking the glare coming off all that wonderful ice and snow. Zoom Sun Designer Collection sunglasses, \$16.99; CVS, amazon.com. 7 A flattering pink shade that serves double duty on lips and cheeks. Josie Maran Argan Color Stick in Petal Pink, \$22; sephora.com.

50

UNDER \$50



IT'S THE **LITTLE** THINGS THAT MAKE A BIG **DIFFERENCE**—

8 Such cool boots: You're the family general, so why not look the part? Riding boots, \$48; uniquevintage.com. 9 We almost keeled over when we saw the price on this. Satchel, \$36; afaze.com. 10 A cozy knit, tied with a lovely, lingerie-style bow. Cardigan, \$34.80; forever21.com. 11 Avoid hat head by wearing one you'll hate to take off. Cloche, Laila Rowe, \$16; lailarowe.com. 12 The height of sultry, welcome-to-my-boudoir luxury. B.Tempt'd by Wacoal bra, \$36; Dillard's. 13 A golden birdie for your flyaways? So cute! Come Fly With Me bobby pin, \$14; emilyelizabethjewelry.com. 14 Old black coat, meet your new best friend. A.N.A. by JCPenney scarf, \$14.99; JCPenney stores. 15 It's a fresh decade—time to upgrade the makeup bag. Nantucket Wine Laura bag, \$38; stephaniejohnson.com. 16 An ultra-rich yet nongreasy face cream. Organic Olive Essence Organic Gold Healing Nutrient cream, \$29.99; homespacollection.com.



BOLD COLOR, LUXE SPARKLE, AND A SEXY PEEK OF LACE.

PLATE: COURTESY OF MANUFACTURER.

- 17 Pretty flower plates so you don't need any blooms for the middle of the table. Poppy dessert plates, \$48 for 4; spiegel.com. 18 Hooray! An organic, gentle, terrific-smelling polish remover *does* exist. Karma Organic Spa lavender nail polish remover, \$12; karmaorganicspa.com. 19 Because a trench is a staple to swear by forever. LiveLife by Sanctuary trench, \$42.50; Sears. 20 No matter how late you are, glancing at this will make you happy. Breda watch, \$23.10; endless.com. 21 The best defense against dry skin: a warm tub and these long-lasting oils. ESPA Little Box of Calm bath and body oils, \$18; 877-ESPA-USA. 22 A wine rack that looks like modern sculpture when empty (good excuse to polish off that last bottle!). Umbra Grapevine wine rack, \$19.99; amazon.com. 23 All glimmery, jangly, glitzy fun. Bracelet, \$35; jenniferelizabeth.com. 24 Delicate drop earrings faceted to catch the light. Handmade earrings, \$49; nicolayoon.com.



GIVE YOUR HOME (AND YOURSELF!) A MINI-MAKEOVER

25 One of the best, truest rose scents we've sniffed. Demeter Naturals eau de toilette splash in Rose, \$8; demeterfragrance.com. 26 Reason to start praying for rain. Umbrella, \$24.95; dlrainwear.com. 27 Sparkly bangles always look amazing stacked over a sweater sleeve. Kendra bangles, \$45; sushmapatel.us. 28 Let your nails have a Rita Hayworth moment with this rich red polish. Duri nail color in From Dusk Till Dawn, \$5; duri.com. 29 A cheery, sporty watch makes that gym-going resolution so much easier to keep. Timex watch, \$19.96; endless.com. 30 Give your kids a bright visual for exactly how long they have left to play. Green sand 15-minute glass, \$9.95; cb2.com. 31 Just as versatile as black, and sooo beautiful. Large tote, Navoh, \$49; navoh.com. 32 Throw this on over a tank for a very low-key Palm Beach-heiress vibe. Sophia necklace, \$25; towneandree.com.



WITH ITEMS THAT REALLY PUT THE *FUN* IN **FUNCTIONAL**.

HOURGLASS, CUTTING BOARD, MIRROR:
COURTESY OF MANUFACTURERS.

33 A clutch that a Bollywood princess—and any other fashion plate—would love. Clutch, \$41.25; bombayfashions.com. 34 Wear this next date night; he'll totally let you pick the movie. Elle top, \$34; kohls.com. 35 Reading glasses? These are (*ahem*) a style statement, thank you very much. Eileen West readers, \$28; eileenwest.com. 36 A mirror that's instant artwork for your wall. Lily Fleur mirror, \$38; urbanoutfitters.com. 37 This headband makes growing out bangs a ton more fun. L. Erickson bow headband, \$42; franceluxe.com. 38 Transportingly delicious—smelling soap... if you can stand to unwrap the pretty paper. Alora Ambiance Verde triple-milled shea butter soap, \$14; aloraambiance.com. 39 The first step toward clutter control? Buying a good-looking wastebasket. Loosewire bin, \$29; conranusa.com. 40 A chopping board worthy of kitchen-counter real estate. Colorful Cutting Boards Cook, \$36; cambriacove.com.





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Discover Beauty Within. It's as easy as stopping by your local Walgreens. You'll find the best products and, with our trained Beauty Advisors in store, you'll always get the new scoop at the right price. It doesn't take a two-hour appointment to find a new look. Sometimes, all you need is your lunch break.

NEW



Transform split ends into healthy-looking hair with new **Nexxus ProMend**. The first product line to focus on true split end repair, **ProMend** binds split ends back together in one use.

NEXXUS
SALON HAIR CARE

PRO-MEND
TECHNOLOGY

NEW



Revlon ColorStay Aqua™ Mineral Makeup gives skin instant hydration. Custom Eyes™ Mascara and Custom Eyes™ Shadow/Liner offer endless ways to customize your eye look. ColorBurst™ Lipgloss adds rich, vibrant color.

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Enter for a chance to **win a trip to New York for a head to toe styling** and other great prizes. For details go to: www.walgreens.com/beautywithin. No purchase necessary. Must be 18 years or older. Offer good in all 50 United States and D.C. Void in Puerto Rico and where prohibited. Promotion 12/14/10-1/31/11.

Walgreens There's a way™

10

UNDER \$10



41



42



43



44

WIDDLE BITTY PRICES, YET TOTAL SOPHISTICATION. SCORE!



50



49



45

\$8 ring!



46



48



47

- 41 Practical warmth in a wildly enjoyable color. Hat, \$4.80; forever21.com. 42 This scrub brush benefits breast cancer research, scoring it a place in our hearts (and at our sinks). Brushing Beauty, \$4.99; kitchenkapers.com. 43 There's always someone with the adorable office supplies—why shouldn't it be you? Fruit memo desk pad, \$4; kikkerlandshop.com. 44 Going green is simple with this dual water filter/bottle. 18.5-oz Bobble, \$9.95; water bobble.com. 45 A glamazon ring for a gumball sum. Ring, \$8; afaze.com. 46 Just because nobody's *seeing* your toes doesn't mean they can't be rockin'. Wet n Wild Wild Shine nail color in Night Prowl, \$9.99; cvs.com. 47 A quad of green shades makes eyes look much brighter. Essence Cosmetics Quattro Eyeshadow in Rock Angel, \$2.99; ulta.com. 48 SPF-infused foundation ideal for any (and every) day. Maybelline Fit Me! foundation, \$7.99; maybelline.com. 49 This itty brush may live in your purse, but the cute design means you should whip it out a *lot*. The Body Shop bamboo mini hairbrush, \$5; thebodyshop.com. 50 Dish soap that's moisturizing—and so coolly mod-looking. Daub & Bauble concentrated dish detergent, \$9; daubandbauble.com.

...AND THIS STUFF'S ALL FREE



\$250,000 IN COLD, HARD CASH

Last year, one lucky REDBOOK reader walked away with \$100,000. Now the pot has more than doubled! For a chance to win, enter at win250k.redbookmag.com. See page 155 for details.



Go to redbookmag.com/freebies and enter for a chance to win these fabulous prizes: 1 12 readers will each win 2 matching sterling-silver necklaces from Lisa Leonard, in your favorite design—one for yourself and one for a friend. Value of set, \$130. 2 10 readers will each win a \$213 Golden Triangle Collection from Sue Devitt Beauty, including eye intensifier pencil, eyeshadow, lash-intensifier and lengthening mascara, lip-enhancing gloss, and eye, lip, and cheek highlighter. 3 1 reader will win a 4-night trip for 2 to St. Croix from the U.S. Virgin Islands and the Buccaneer Hotel, including 2 \$300 airfare vouchers, \$100 for shopping at local stores, and a \$100 activity credit to spend on golf, tennis, and more. Total retail value, \$1,900. 4 8 readers will each win a \$200 Contempo 10-piece set of hard-anodized aluminum cookware from Circulon. 5 7 readers will each win a \$220 Sponge Skincare set, including avocado oil for face, neck, and décolleté, anti-wrinkle eye cream, and firming eye gel. 6 10 readers will each win a LeSportsac Large Weekender bag—in your choice of pattern—filled with all-natural Kind snack bars. Value of set, \$216.

YOUR ^{NEW} PLACE TO shop

What are we loving right now? REDBOOK's new app, One Stop Shop, has our editors' picks for the coolest trends and hottest buys. See something you like? This app doesn't just bring you the best of the best in fabulous products—it also tells you exactly where you can buy them!



Fashion finds, beauty must-haves, home essentials, and easy recipes are all at your fingertips. Visit the App Store on your iPhone to download it for FREE!



WHAT TO WEAR

GREAT CLOTHES FOR REAL LIFE

Why you'll fall in love with a **major carryall**:

1 Schlepping your life around has never been so stylish, thanks to new mega-bags in gorgeous colors with fun details.

2 Good-bye, Quasimodo hunch. The picks here are surprisingly lightweight (just don't use them to carry a bowling ball).

3 Let's all clap for shoulder straps! Go ahead, hold your kid's hand *and* a coffee.

4 You can get ones that look like they cost a car payment for under \$50. Just turn the page!

TREND WITH BENEFITS

Really, really big bags

Bag, Coach, \$798; Coach stores, 866-262-2440. Scarf, Fraas, \$30; 212-575-0191. Cardigan, Michael Michael Kors, \$100; select Michael Kors stores, 866-709-KORS for locations. Shirt, Tommy Hilfiger, \$88; Tommy Hilfiger, NYC, 212-223-1824. Peridot and diamond earrings, Helen Ficalora, \$450; 877-754-2676 to order.

TREND WITH BENEFITS

CRAM 'EM FULL OF, WELL, *EVERYTHING*—AND STILL LOOK CHIC!

MESSENGERS



HOBOS



SATCHELS



BUCKETS



1. The Sak, \$109; thesak.com. 2. Duluth Pack, \$85; duluthpack.com. 3. Fossil, \$128; fossil.com.
4. Gorjana, \$365; gorjana.com. 5. Lulu's, \$26.50; lulus.com. 6. Pietro Alessandro, \$300; pietroalessandro.com.
7. Foley + Corinna, \$450; foleyandcorinna.com. 8. Talbots, \$295; talbots.com. 9. Michael Michael Kors, \$368; 866-709-KORS for store info. 10. Simply Vera Vera Wang, \$79; kohls.com.
11. Jessica Simpson Collection, \$108; amazon.com. 12. L.A.M.B. Handbags, \$398; Nordstrom. 13. Converse One Star for Target, \$34.99; target.com. 14. MZ Wallace, \$415; mzwallace.com. 15. Lucky Brand, \$169; endless.com. 16. Mango, \$90; mangoshop.com. 17. Rebecca Minkoff, \$495; endless.com. 18. Forever 21, \$24.80; forever21.com.

Even Jessica Alba's whopper feels polished.

GROW LONGER, GROW FULLER, AND DARKER LASHES SEEING IS BELIEVING!

LATISSE® is the first and only FDA approved prescription treatment for inadequate or not enough lashes.
It's easy to ask your doctor if LATISSE® is right for you.

GROW YOUR OWN LASHES

Latisse®

(bimatoprost ophthalmic solution) 0.03%

WEEK 0



WEEK 16



Brooke Shields without mascara-lashes not retouched.

WEEK 0



WEEK 16



Claire Danes without mascara-lashes not retouched.

Your results may vary. By prescription only.

LATISSE® is a prescription treatment for hypotrichosis used to grow eyelashes, making them longer, thicker, and darker. Eyelash hypotrichosis is another name for having inadequate or not enough eyelashes.

Important Safety Information:

If you are using, or have used, prescription products for any eye pressure problems, only use LATISSE® under close doctor care. Although not seen in LATISSE® clinical studies, may cause increased brown pigmentation of the colored part of the eye which is likely permanent. Eyelid skin darkening may occur which may be reversible. Only apply at the base of the upper eyelashes. DO NOT APPLY to the lower eyelid. Hair growth may occur in other skin areas that LATISSE® solution frequently touches. If you develop or experience any eye problems or have eye surgery, consult your doctor immediately about continued use of LATISSE®. The most common side effects are itchy eyes and eye redness. If discontinued, lashes will gradually return to their previous appearance.

You are encouraged to report negative side effects of prescription drugs to the FDA.

Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

Please see important product information on the following page. Call 1-866-344-5480 for more information.

*Offer applies to first-time registrants only. Please see additional terms and conditions at Latisse.com.



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FROM ALLERGAN,
A COMPANY WITH 60 YEARS
OF EYE CARE EXPERTISE.

GO TO LATISSEOFFER.COM
TO LEARN MORE
ABOUT A \$20 REBATE*

PATIENT INFORMATION

LATISSE® (la tteece) (bimatoprost ophthalmic solution) 0.03%

Read the Patient Information that comes with **LATISSE®** before you start using it and each time you get a refill. There may be new information. This leaflet does not take the place of talking with your physician about your treatment.

What is hypotrichosis of the eyelashes?

Hypotrichosis is another name for having inadequate or not enough eyelashes.

What is **LATISSE®** solution?

LATISSE® solution is a prescription treatment for hypotrichosis used to grow eyelashes, making them longer, thicker and darker.

Who should NOT take **LATISSE®**?

Do not use **LATISSE®** solution if you are allergic to one of its ingredients.

Are there any special warnings associated with **LATISSE®** use?

LATISSE® solution is intended for use on the skin of the upper eyelid margins at the base of the eyelashes. Refer to Illustration 2. **DO NOT APPLY** to the lower eyelid. If you are using **LUMIGAN®** or other products in the same class for elevated intraocular pressure (IOP), or if you have a history of abnormal IOP, you should only use **LATISSE®** under the close supervision of your physician.

LATISSE® use may cause darkening of the eyelid skin which may be reversible. **LATISSE®** use may also cause increased brown pigmentation of the colored part of the eye which is likely to be permanent.

It is possible for hair growth to occur in other areas of your skin that **LATISSE®** frequently touches. Any excess solution outside the upper eyelid margin should be blotted with a tissue or other absorbent material to reduce the chance of this from happening. It is also possible for a difference in eyelash length, thickness, fullness, pigmentation, number of eyelash hairs, and/or direction of eyelash growth to occur between eyes. These differences, should they occur, will usually go away if you stop using **LATISSE®**.

Who should I tell that I am using **LATISSE®**?

You should tell your physician you are using **LATISSE®** especially if you have a history of eye pressure problems.

You should also tell anyone conducting an eye pressure screening that you are using **LATISSE®**.

What should I do if I get **LATISSE®** in my eye?

LATISSE® solution is an ophthalmic drug product. **LATISSE®** is not expected to cause harm if it gets into the eye proper. Do not attempt to rinse your eye in this situation.

What are the possible side effects of **LATISSE®**?

The most common side effects after using **LATISSE®** solution are an itching sensation in the eyes and/or eye redness. This was reported in approximately 4% of patients. **LATISSE®** solution may cause other less common side effects which typically occur on the skin close to where **LATISSE®** is applied, or in the eyes. These include skin darkening, eye irritation, dryness of the eyes, and redness of the eyelids.

If you develop a new ocular condition (e.g., trauma or infection), experience a sudden decrease in visual acuity, have ocular surgery, or develop any ocular reactions, particularly conjunctivitis and eyelid reactions, you should immediately seek your physician's advice concerning the continued use of **LATISSE®** solution.

What happens if I stop using **LATISSE®**?

If you stop using **LATISSE®**, your eyelashes are expected to return to their previous appearance over several weeks to months.

Any eyelid skin darkening is expected to reverse after several weeks to months.

Any darkening of the colored part of the eye known as the iris is NOT expected to reverse and is likely permanent.

How do I use **LATISSE®**?

LATISSE® solution is packaged as a 3 mL bottle of solution with 60 accompanying sterile, disposable applicators. The recommended dosage is one application nightly to the skin of the upper eyelid margin at the base of the eyelashes only.

Once nightly, start by ensuring your face is clean, makeup and contact lenses are removed. Remove an applicator from its tray. Then, holding the sterile applicator horizontally, place one drop of **LATISSE®** on the area of the applicator closest to the tip but not on the tip (see Illustration 1). Then immediately draw the applicator carefully across the skin of the upper eyelid margin at the base of the eyelashes (where the eyelashes meet the skin) going from the inner part of your lash line to the outer part (see Illustration 2). Blot any excess solution beyond the eyelid margin. Dispose of the applicator after one use.

Repeat for the opposite upper eyelid margin using a new sterile applicator. This helps minimize any potential for contamination from one eyelid to another.



ILLUSTRATION 1



ILLUSTRATION 2

DO NOT APPLY in your eye or to the lower lid. **ONLY** use the sterile applicators supplied with **LATISSE®** to apply the product. If you miss a dose, don't try to "catch up." Just apply **LATISSE®** solution the next evening. Fifty percent of patients treated with **LATISSE®** in a clinical study saw significant improvement by 2 months after starting treatment.

If any **LATISSE®** solution gets into the eye proper, it is not expected to cause harm. The eye should not be rinsed.

Don't allow the tip of the bottle or applicator to contact surrounding structures, fingers, or any other unintended surface in order to avoid contamination by common bacteria known to cause infections.

Contact lenses should be removed prior to application of **LATISSE®** and may be reinserted 15 minutes following its administration.

Use of **LATISSE®** more than once a day will not increase the growth of eyelashes more than use once a day.

Store **LATISSE®** solution at 36° to 77°F (2° to 25°C).

General Information about **LATISSE®**

Prescription treatments are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Do not use **LATISSE®** solution for a condition for which it was not prescribed. Do not give **LATISSE®** to other people. It may not be appropriate for them to use.

This leaflet summarizes the most important information about **LATISSE®** solution. If you would like more information, talk with your physician. You can also call Allergan's product information department at 1-800-433-8871.

What are the ingredients in **LATISSE®**?

Active ingredient: bimatoprost

Inactive ingredients: benzalkonium chloride; sodium chloride; sodium phosphate, dibasic; citric acid; and purified water. Sodium hydroxide and/or hydrochloric acid may be added to adjust pH. The pH during its shelf life ranges from 6.8 - 7.8.

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End the daily getting-dressed crisis!



We love **Stacy London** for her mince-no-words fashion advice. Use the rules she swears by.

Stacy London has a special power: She transforms wardrobe-challenged women on *What Not to Wear* into smart dressers—in just two days! So we cornered the fashion maven (who just launched a personal-styling company, Style for Hire) and shook her down for tips to a foolproof look.

■ **Get a black blazer.** “It adds the finishing touch to any outfit. My favorite one is from Stella McCartney, and when I’m not on set I’m in that, along with a silk blouse that has some visual detail and skinny jeans.”

■ **Never underestimate a great dress.** “Throw on a dress and you’re instantly pulled together. That’s why I always wear one for work. Plus, styles that accent the waist and have an A-line bottom are flattering on every shape and size.”

■ **Get real with yourself.** “The biggest mistake women make is wearing clothes that don’t fit because they don’t accept the body they have right *now*. You have to do that in order to figure out what looks good on you. And besides, confidence is the best accessory. It can make or break an outfit.”

BAG X-RAY

“My team pokes fun at me for never being able to find stuff in my purse.”



Stacy’s bag is, she admits, ▶ a jumble: pale lip gloss (“I ‘borrow’ it from my makeup artist”); Balinese worry beads; a colorful beret and gloves; hand sanitizer and sugar-free cough drops (“I’m totally addicted to them”); plus a tangle of gadgets and their chargers, including a BlackBerry, an iPad, a Kindle, and an iPhone. Nars lip gloss in Greek Holiday, \$24; narscosmetics.com. Hat, Laundry by Shelli Segal, \$50; It’s All About Me Now, Brooklyn, NY, 718-513-6664. Gloves, Carolina Amato, \$45; carolinaamato.com. Kindle, starting at \$139; amazon.com. iPhone, from \$99; apple.com.



What to wear? Blazer, Jones New York Collection, \$199; Macy’s. Blouse, Veronica M, \$70; veronicamclothing.com. Jeans, Express, \$60; express.com. Scarf, Chan Luu, \$195; chanluu.com. Shoes, Charles David, \$230; nordstrom.com. Watch, La Mer, \$99; nationaljeancompany.com.



London adores this oversize woven Bottega Venetta satchel (top). A less-pricey option: Deux Lux (left), \$150; shop2lux.com.

A sweater jacket to solve all style problems

It works  with a preppy , a fluffy , and  plus your most beloved pair of jeans. Getting dressy-casual for Sunday brunch is a breeze with a tee, a , and . Feeling playful? Mix it up with a bright, girly  and superglam , then cinch with a wild print . (Don't forget some pants!) And to finish off each one of these looks: a carry-it-forever  ...and ever and ever .

Striped sweater, Autumn Cashmere, \$242; autumncashmere.com. Hat, Hat Attack, \$50; 617-227-4441. Sunglasses, XOXO, \$26; Sears. Skirt, Banana Republic, \$80; bananarepublic.com. Ballet flats, Joan & David, \$198; select Nordstrom stores. Top, She Said by JCPenney, \$20.99; jcp.com. Ring, Accessorize, \$20; accessorize.com. Belt, Brave Leather, \$90; braveleather.com. Bag, L.L.Bean Signature, \$195; lbeansignature.com.



What makes this wooly jacket so great? It's dripping with Parisian elegance but is as comfy as your grandpa cardigan. Ann Taylor, \$168; anntaylor.com.



◀ Do a work-to-drinks switcheroo

Remove black office pumps. Replace with sexy, colorful ones. Done.

Tank, William Rast for Target, \$26.99; target.com. Belt, Old Navy, \$12.50; oldnavy.com. Earrings, Moon & Lola, \$49; moonandlola.com. Skirt, Peruvian Connection, \$139; peruvianconnection.com. Pumps, Charles by Charles David, \$100; zappos.com.



Make errands seem stylish ▶

Give your puffy vest a rest and add practical-but-cool pieces like this stain-proof bag.

Scarf, AMI Clubwear, \$13.99; amiclubwear.com. Top, Kenneth Cole New York, \$89; KCNY stores. Patent-leather bag, Hobo International, \$268; hobobags.com. Jeans, Nautica, \$55; nautica.com. Flats, Lovely People Shoes, \$79; lovelypeople-usa.com.



◀ *Play with the mix*

A big, bold pattern is much easier to pull off (but still broadcasts confidence) with this classic topper.

Dress, Sisley, \$79; 800-535-4491 for store locations.
Necklace, Roberta Freymann, \$75; Roberta Freymann, NYC, 212-717-7373. Heels, Pelle Moda, \$160; amazon.com.



Spice up ▶ *girls' night*

With slim cargos, some pops of color, and a bit of sparkle, it's a blast.

Earrings, Lady & Ruin, \$185; ladyandruin.com. Top, New York & Company, \$36.95; nyandcompany.com. Clutch, Sir Alistair Rai, \$98; siralistairrai.com. Pants, Ra-Re Donna, \$230; See Saw, Tenafly, NJ, 201-567-5560. Shoes, Sam Edelman, \$130; endless.com.



◀ *Take it to the theater*

Adding shiny accents makes this right for a fancy evening. (Yet you will not freeze! Genius!)

Necklace, Samantha Wills, \$458; samanthawills.com. Dress, Boden, \$198; bodenusa.com. Bag, London Fog, \$150; 800-847-0072 for store locations. Booties, Marc by Marc Jacobs, \$295; endless.com.



Trend alert! Cute lace-up wedges

WHAT WOULD

Sarah Jessica Parker DO?



CASUAL

Her slightly messy styling—pushed-back T-shirt sleeves, scrunch cords—looks accidentally cool.



SOFT GLAM

SJP throws a just-wore-it-this-morning sweater over major sparkle, and it all seems effortless.



LADYLIKE

She pairs two fancy pieces with very different vibes: prim on the top, superfun on the bottom.

Steal SJP's style! She has a knack for making offbeat mixes feel right (and gets tons of mileage out of *everything*). So can you.



Look for everyday pieces that are one notch up from basic (a leopard-print scarf, velvety cords, furry boots).

Scarf, Bindya NY, \$100; Bergdorf Goodman. Henley top, Michael Stars, \$68; michaelstars.com. Corduroys, Banana Republic, \$80; bananarepublic.com. Boots, Jack Rogers, \$298; jackrogersusa.com.



This sweater is great dressed up or down. Sweater, BB Dakota, \$95; shopnastygal.com.



A glimmery skirt is the perfect match for a slouchy V-neck and a cross-body bag—or a plush jacket. Skirt, Loft, \$80; loftonline.com. Bag, Urban Expressions, \$47; m2boutique.com. Jacket, Boden, \$138; bodenusa.com.



How to finish any outfit? With fabulously sexy, leg-lengthening neutral heels. Heels, Schutz, \$240; Martier, NYC, 212-758-5370.



What's causing your chronic widespread MUSCLE pain?

The answer may be over-active NERVES.

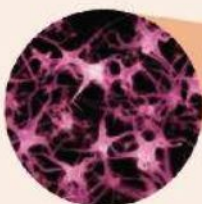
FIBROMYALGIA

is chronic widespread muscle pain **thought to be caused by over-active nerves.**



LYRICA®
is **believed to calm these nerves.**

It's not an anti-depressant.



Artist depiction

LYRICA® (pregabalin) can provide significant relief from Fibromyalgia pain.

In some patients, it works in as early as the first week of treatment. Have the Lyrica conversation with your doctor today. Visit www.lyrica.com or call 1-888-5-LYRICA.



RELIEF can start here.

Prescription Lyrica is not for everyone. Tell your doctor right away about any serious allergic reaction that causes swelling of the face, mouth, lips, gums, tongue, throat or neck or any trouble breathing or that affects your skin. Lyrica may cause suicidal thoughts or actions in a very small number of people. Call your doctor right away if you have new or worsening depression, suicidal thoughts or actions, or unusual changes in mood or behavior. Lyrica may cause swelling of your hands, legs and feet. Some of the most common side effects of Lyrica are dizziness and sleepiness. Do not drive or work with machines until you know how Lyrica affects you. Other common side effects are blurry vision, weight gain, trouble concentrating, dry mouth, and feeling "high." Also, tell your doctor right away about muscle pain along with feeling sick and feverish, or any changes in your eyesight including blurry vision or any skin sores if you have diabetes. You may have a higher chance of swelling, hives or gaining weight if you are also taking certain diabetes or high blood pressure medicines. Do not drink alcohol while taking Lyrica. You may have more dizziness and sleepiness if you take Lyrica with alcohol, narcotic pain medicines, or medicines for anxiety. If you have had a drug or alcohol problem, you may be more likely to misuse Lyrica. Tell your doctor if you are planning to father a child. Talk with your doctor before you stop taking Lyrica or any other prescription medication.

Please see Important Facts Brief Summary on adjacent page.

To learn more visit www.lyrica.com or call toll-free 1-888-5-LYRICA (1-888-559-7422).

You are encouraged to report negative side effects of prescription drugs to the FDA.

Visit www.FDA.gov/medwatch or call 1-800-FDA-1088.

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IMPORTANT FACTS



(LEER-i-kah)

IMPORTANT SAFETY INFORMATION ABOUT LYRICA

LYRICA may cause serious, even life threatening, allergic reactions. Stop taking LYRICA and call your doctor right away if you have any signs of a serious allergic reaction:

- Swelling of your face, mouth, lips, gums, tongue, throat or neck
- Have any trouble breathing
- Rash, hives (raised bumps) or blisters

Like other antiepileptic drugs, LYRICA may cause suicidal thoughts or actions in a very small number of people, about 1 in 500.

Call your doctor right away if you have any symptoms, especially if they are new, worse or worry you, including:

- New or worsening depression
- Suicidal thoughts or actions
- Unusual changes in mood or behavior

Do not stop LYRICA without first talking with your doctor.

LYRICA may cause swelling of your hands, legs and feet.

This swelling can be a serious problem with people with heart problems.

LYRICA may cause dizziness or sleepiness.

Do not drive a car, work with machines, or do other dangerous things until you know how LYRICA affects you. Ask your doctor when it is okay to do these things.

ABOUT LYRICA

LYRICA is a prescription medicine used in adults 18 years and older to treat:

- Pain from damaged nerves that happens with diabetes or that follows healing of shingles
- Partial seizures when taken together with other seizure medicines
- Fibromyalgia (pain all over your body)

Who should NOT take LYRICA:

- Anyone who is allergic to anything in LYRICA

BEFORE STARTING LYRICA

Tell your doctor about all your medical conditions, including if you:

- Have had depression, mood problems or suicidal thoughts or behavior
- Have or had kidney problems or dialysis
- Have heart problems, including heart failure
- Have a bleeding problem or a low blood platelet count
- Have abused prescription medicines, street drugs or alcohol in the past
- Have ever had swelling of your face, mouth, tongue, lips, gums, neck, or throat (angioedema)
- Plan to father a child. It is not known if problems seen in animal studies can happen in humans.
- Are pregnant, plan to become pregnant or are breastfeeding. It is not known if LYRICA will harm your unborn baby.

You and your doctor should decide whether you should take LYRICA or breast-feed, but not both.

Tell your doctor about all your medicines. Include over-the-counter medicines, vitamins, and herbal supplements.

LYRICA and other medicines may affect each other causing side effects. Especially tell your doctor if you take:

- Angiotensin converting enzyme (ACE) inhibitors. You may have a higher chance for swelling and hives.

BEFORE STARTING LYRICA, continued

- Avandia® (rosiglitazone)*, Avandamet® (rosiglitazone and metformin)* or Actos® (pioglitazone)** for diabetes. You may have a higher chance of weight gain or swelling of your hands or feet.
- Narcotic pain medicines (such as oxycodone), tranquilizers or medicines for anxiety (such as lorazepam). You may have a higher chance for dizziness and sleepiness.
- Any medicines that make you sleepy

POSSIBLE SIDE EFFECTS OF LYRICA

LYRICA may cause serious side effects, including:

- See "Important Safety Information About LYRICA."
- Muscle problems, pain, soreness or weakness along with feeling sick and fever
- Eyesight problems including blurry vision
- Weight gain. Weight gain may affect control of diabetes and can be serious for people with heart problems.
- Feeling "high"

If you have any of these symptoms, tell your doctor right away.

The most common side effects of LYRICA are:

- Dizziness
- Blurry vision
- Weight gain
- Sleepiness
- Trouble concentrating
- Swelling of hands and feet
- Dry mouth

If you have diabetes, you should pay extra attention to your skin while taking LYRICA and tell your doctor of any sores or skin problems.

HOW TO TAKE LYRICA

Do:

- Take LYRICA exactly as your doctor tells you. Your doctor will tell you how much to take and when to take it. Take LYRICA at the same times each day.
- Take LYRICA with or without food.

Don't:

- Drive a car or use machines if you feel dizzy or sleepy while taking LYRICA.
- Drink alcohol or use other medicines that make you sleepy while taking LYRICA.
- Change the dose or stop LYRICA suddenly. You may have headaches, nausea, diarrhea, or trouble sleeping if you stop taking LYRICA suddenly.
- Start any new medicines without first talking to your doctor.

NEED MORE INFORMATION?

- Ask your doctor or pharmacist. This is only a brief summary of important information.
- Go to www.lyrica.com or call 1-866-459-7422 (1-866-4LYRICA).

Uninsured? Need help paying for Pfizer medicines? Pfizer has programs that can help. Call 1-866-706-2400 or visit www.PfizerHelpfulAnswers.com.



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** Actos is a registered trademark of Takeda Chemicals Industries, Ltd., and is used under license by Takeda Pharmaceuticals of America, Inc., and Eli Lilly and Co.

Rx only

XF
EXTENDED FITNESS™
LOWER PROFILE



SKECHERS
Fitness Group

Shape-ups

Don't Waste Another Step

- Activates more muscle groups
- Alleviates foot and back pain
- Reduces stress on knees, hips and back
- Firms thigh and calf muscles

also available at
 **Famous
Footwear**

CAN SCIENTIFIC STUDIES
AND BEAUTY MAGAZINES AGREE
on what's effective in anti-aging skin care?

Olay®
PROFESSIONAL



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OLAY PROFESSIONAL PRO-X

In beauty and science magazines and in a dermatology periodical, Olay Professional Pro-X is recognized as not just effective, it's been cited for cutting-edge technology. It's in line with a leading prescription brand at reducing the look of wrinkles, and has been given a Best of Beauty Award. Olay Professional. Anti-aging with expertise, science and women behind it. OlayProfessional.com

PROX POTENT. PROVEN. PROFESSIONAL.

Pro-X hydrates to reduce the appearance of wrinkles. The prescription takes 24 weeks to see full results and longer-term comparative results may be different. *Age Repair Lotion.

BEAUTY & HEALTH

INFO TO HELP YOU LOOK AND FEEL GREAT



ALL THE TRICKS FOR

Spoiling yourself from head to toe

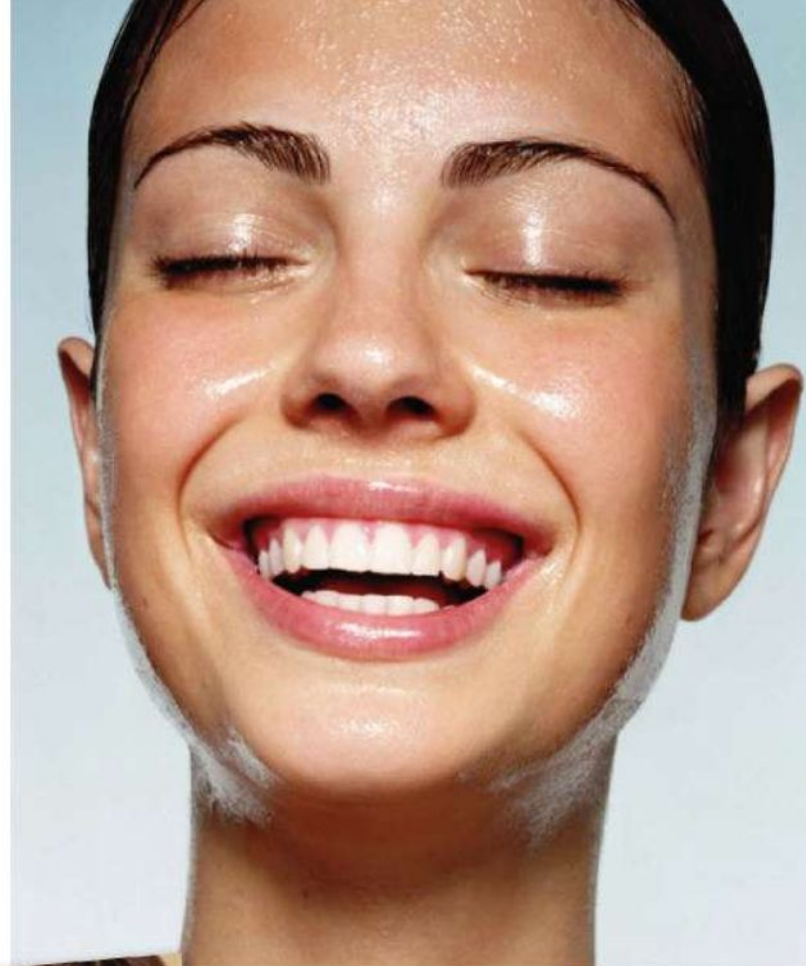
We asked experts for their best ways to undo stress, then our (poor, overworked!) staff tested them. Lock the bathroom door and try:

● Free ways to give yourself pricey spa treatments ● A quickie foot massage (you'll want to teach your guy) ● The tennis-ball trick for relieving stress, and more! By Krista Bennett De Maio

WRAP YOUR LEGS free!



Ginger, a natural anti-inflammatory, is great in a hot compress for achy legs, says Michael Shanahan, massage director at Paul Labrecque Salon and Spa in New York City. Grate fresh ginger into a pot of boiling water and simmer for 10 minutes. Then soak a hand towel in the water, let it cool slightly, and wrap around shins. **TESTERS SAID:** "I felt my muscles go limp," and "the spicy ginger erased the stress of the day."



WARM UP YOUR MASK

Pour a gel-based mask into a cup, then pop it in the microwave for 15 seconds before applying it. "The heat helps the mask penetrate your skin better, and it feels amazing," says Cerina Silvestro, an aesthetician at La Prairie at the Ritz-Carlton Spa in New York City. Try it with Freeman Superfruits Revealing Peel-Off Facial Mask, \$4. **TESTERS SAID:** "So nice and toasty," and "nuking it brought out the fruity scent."



UNCOVER GREAT SKIN free!

Actresses including Kate Walsh love facials by Los Angeles's Kate Somerville because they're extra... McSteamy. Give Somerville's radiance-boosting tip a shot: "Apply moist heat to your face before you exfoliate to help loosen the dead skin." It couldn't be easier. Standing in a hot shower, press a wet washcloth over your face for a few minutes, then scrub. **TESTERS SAID:** "Amazing"; it made skin "soft and smooth—almost slick"; and "my moisturizer soaked in so much more quickly than usual."



GET HAPPY FEET free!

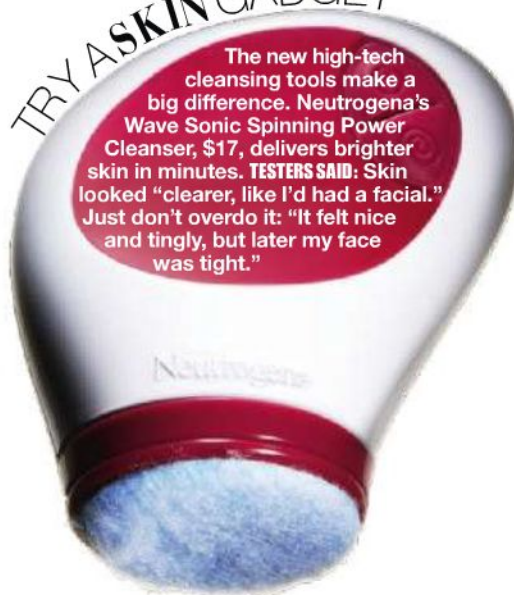
A great foot rub = total bliss. Barbara Close, founder of Naturopathica holistic skin care, told us where to dig in.

With thumbs on your sole and fingers on top of one foot, twist your hands in opposite directions, as if you're wringing out your foot. Next, sink your thumb just below the inside of your ankle bone and hold for three seconds. Repeat several times, inching toward the big toe. Then gently squeeze the fleshy area between each toe. **TESTERS SAID:** This self-massage felt "surprisingly great," but "it would be even better if my husband did this to me."



TRY A SKIN GADGET

The new high-tech cleansing tools make a big difference. Neutrogena's Wave Sonic Spinning Power Cleanser, \$17, delivers brighter skin in minutes. **TESTERS SAID:** Skin looked "clearer, like I'd had a facial." Just don't overdo it: "It felt nice and tingly, but later my face was tight."





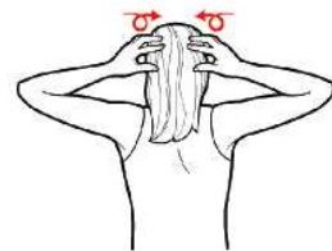
BABY YOUR HANDS

Mariska Hargitay soaks her mitts in skin-softening milk and honey during the Mysterious Wisteria Lane manicure at Just Calm Down Spa in New York City. For the D.I.Y. version, mix one cup of milk with three tablespoons of honey, and microwave for 30 seconds. Submerge hands for 10 to 15 minutes. **TESTERS SAID:** The "sweet" aroma of "warm milk and honey has lovely, sleepy associations"; afterward, skin looked "smoother and brighter—I wanted to soak my whole body in it."

FEEL RICH



Be extra nice to a parched winter complexion by switching to a facial moisturizer made with shea butter, a thick ingredient usually reserved for the driest of body parts, Silvestro says. Try Bobbi Brown Vitamin Enriched Face Base, \$50, or L'Occitane Ultra Moisturizing Fluid SPF 20, \$32. **TESTERS SAID:** The "silky, creamy" formula was "not greasy at all" and "lovely for the face." It "got rid of the dry spots around my nose."



RELAX FROM THE TOP DOWN

Have you ever had a headache that practically made your hair hurt? That's because your scalp holds a ton of tension, Shanahan says. Here's how to untangle that top knot:

Applying moderate pressure with the pads of your fingertips, trace slow, deliberate circles on your temple area. Move toward the top of your head, then down to the base of the skull.

TESTERS SAID: This was "so relaxing" and the perfect way to "re-energize after coming off a long flight." Doing it yourself "lets you control the pressure and direct it where you need it most," said a staffer who lives for the "shampoo rubdown" at her salon.

SCRATCH YOUR OWN BACK



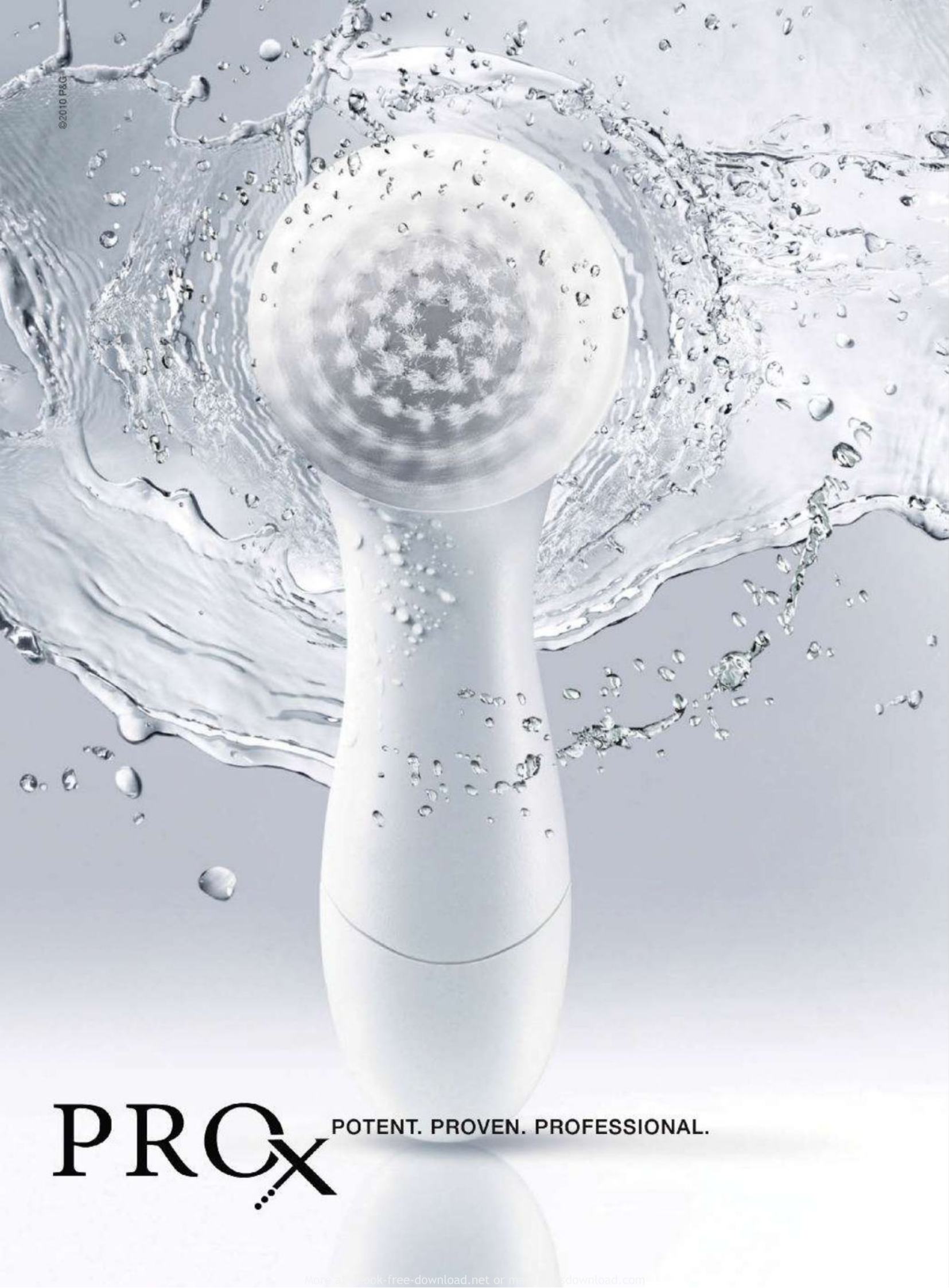
We're big fans of dry brushing, a spa technique performed on dry skin to rev up circulation and remove dead skin. But brushing your own back is always a challenge, which is why we're all over the bendy Earth Therapeutics Purest Palm Back Brush, \$19.99.

TESTERS SAID: It's "scratchy" but "really exfoliated hard-to-reach back skin." Using this helped "wake me up" in the morning. "I felt invigorated afterward."

HAVE A MELTDOWN

To soften toughened heels, heat up your body cream. Or better yet, coat feet with wax from the Jimmy Jane (yes, the sex-toy company) Afterglow Natural Massage Oil Candle, \$29.

TESTERS SAID: This was "more hydrating than regular lotion." Only caveat: Unsurprisingly, it felt like "something to use with my guy."



PROX

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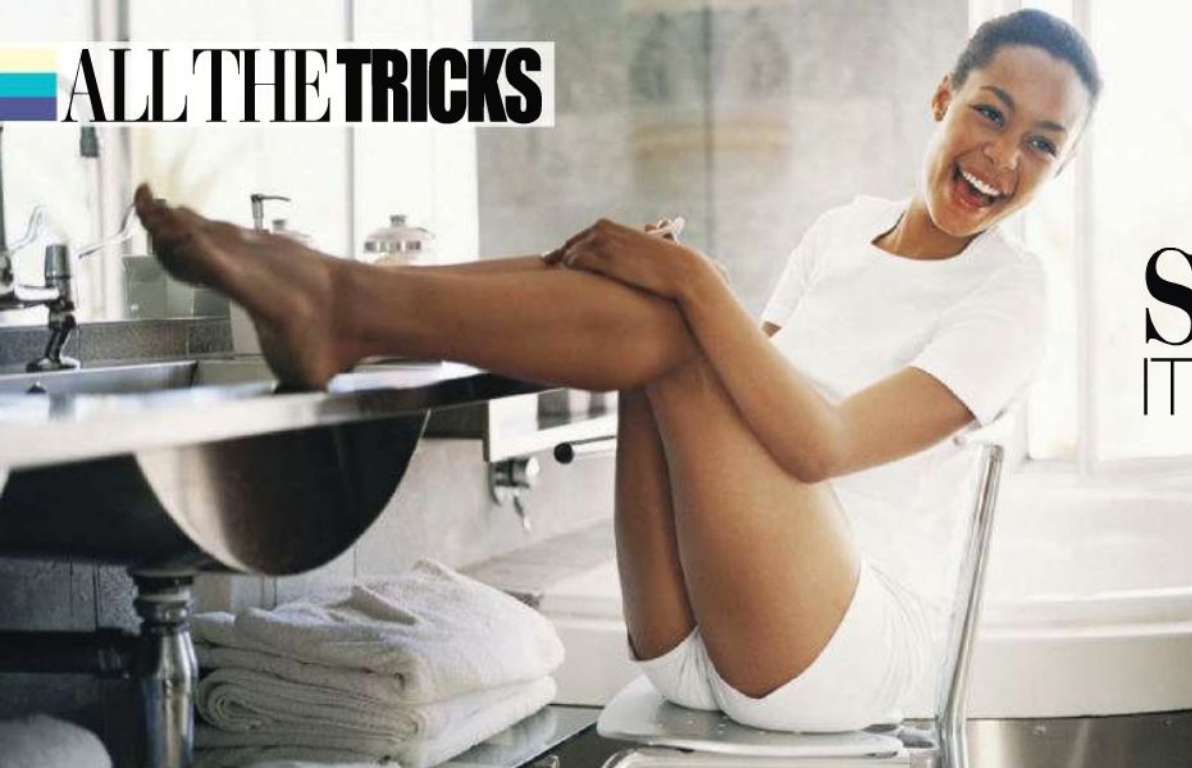


NEW PRO-X ADVANCED CLEANSING SYSTEM.

Facial Cleansing Brush and Exfoliating Renewal Cleanser inside.

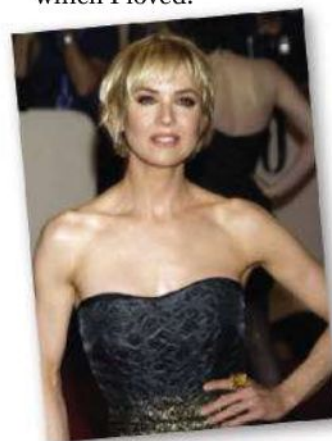
It took a team of dermatologists along with Olay to design this instrument that delivers supersonic cleansing. Professional and clinical, it cleanses 6 times better.** But better than that, the Pro-X Advanced Cleansing System sets your skin up for supersonic anti-aging moisturization.*** **Go to OlayProfessional.com**

*System with normal/dry cleanser. **Than basic cleansing. ***Helps maximize the immediate hydrating effectiveness of your anti-aging moisturizer.



SCRUB IT ALL OFF

Renée Zellweger's body seems to get better and glowier as she ages. What's up with that? Her skin guru, Los Angeles spa owner Ole Henriksen, gave us his best at-home tip. "Just turn off the water in your shower while you apply a body scrub," he says. Running water dilutes the scrub and makes it less effective. An extra-dense option: Henriksen's African Red Tea Exotic Body Scrub, \$65. **TESTERS SAID:** "Take that, dry winter skin patches!" No water meant "a way more intense scrub, which I loved."



DO GROWN-UP BATH TIME

Tub time isn't just for kids. A 15-minute soak is enough to calm your central nervous system so you don't feel frazzled, says Naturopathica founder Barbara Close. For a total escape, add a few drops of your favorite essential oil, or mix a few. We love this set of minis from Aromatherapy Associates, \$50. **TESTERS SAID:** A soak with the sophisticated, "not-too-floral scent" of the Relax oil was "transporting—even in a tub with rubber-ducky stickers on the bottom." Bonus: "Post-bath, I didn't even need lotion."



SNIFF AND SNOOZE

It's Aromatherapy 101: A whiff of lavender helps you wind down. But for optimal impact, look for products that contain *lavandula angustifolia*, the most potent version, Close says. Find it in a product like Jurlique Lavender Hydrating Mist, \$21. **TESTERS SAID:** With a spritz on sheets before bed, "I slept better, I swear." Maybe that's because "it reminded me of the calming smell that hits you as soon as you enter a spa."

TRY THE TENNIS-BALL TRICK

Finally, proof that a massage is more than a luxury: A study found that just one deep-tissue rubdown decreases your cortisol level and boosts immune function. But who can drop a Benjamin on a massage every week? Try this quickie from Elizabeth Hendrix Burwell, trainer and co-owner of High Performance in New York City.

Lie down with knees bent and feet flat on the floor. Place a tennis ball just to the right of the base of your spine (but not on the bone itself). Using your body weight, inch your body down in order to roll the ball up toward your shoulders. Repeat on the left side.

TESTERS SAID: "I could actually hear the crunch when my knots loosened up." It "felt great in between my shoulder blades" and was "way cheaper than my last \$120 massage."



Award-Winning Eyes

Professionally formulated **Olay Pro-X Eye Restoration Complex** is a 2010 *Good Housekeeping* Anti-Aging Award Winner in the Best Eye Cream category! And it's easy to see why. This specialized treatment hydrates to help restore the delicate eye area to its optimum appearance—making you look younger. And it's easy to make it part of your beauty regimen. Follow these eye-opening tips to achieve your own award-winning eyes!



GIVE YOUR BROWS A LIFT

The perfect brow shape can make you look more awake and years younger. Keep the arch right above your pupil for the most natural look. Never over-tweeze—too-thin eyebrows will add years to your face.

LASH ALLURE

Want a more wide-eyed look? Try mascara on the top lashes only, to make your eyes look more open and awake.

EYE-OPENING INNOVATION

Applied morning and night, **Olay Pro-X Eye Restoration Complex** improves the look of crow's feet, diminishes dark circles and reduces puffiness with a breakthrough niacinamide formula. Plus, it hydrates the skin's surface to reduce dryness.

SWEET DREAMS

You may not need a full eight hours, but your skin does. If you routinely skimp on your z's, your eyes will show the evidence. Get more beauty sleep and rest assured you'll look and feel refreshed.



EAT YOUR VEGGIES

Fruits and vegetables are loaded with antioxidants that fight free-radical damage and help eyes look younger and brighter.

BACK IS BEST

Snoozing on your stomach or side can cause sleep lines around your eyes as your face rubs up against your pillow night after night. Flip onto your back, or vary your position.

TRESS THERAPY

The right haircut should make your eyes pop. You can take years off your eyes by framing your face with layers or soft, subtle highlights.

RUB OUT WRINKLES

Use the pad of your middle finger to apply the eye cream, and tap it gently onto your skin—don't vigorously rub it in, because you can tug and pull at the delicate skin.

WINNER: BEST EYE CREAM CATEGORY!

After 18 months of research, Good Housekeeping Research Institute confirms that **Olay Pro-X Eye Restoration Complex** is a 2010 *Good Housekeeping* Anti-Aging Award Winner.



TO LEARN MORE ABOUT PRO-X EYE RESTORATION COMPLEX, VISIT WWW.OLAYPROFESSIONAL.COM

FEND OFF ACUTE JANUARY-ITIS WITH THESE INSTANT BEAUTY UPPERS.



1 Be on time Packed with everything you need, this pretty face palette lets you say, “done in five” and mean it. Ready to Wear Holiday Treasures Makeup Set, \$19.90.

2 Two for the road This lipstick–lip gloss combo gives you options—like doubling up for a statement look—without weighing down your bag. Avon Pro Color and Gloss Lip Duo, \$10.

3 Midnight repairs No more scaly winter legs: Just slather on this antioxidant-packed lotion, which conditions and smooths while you sleep. Jergens Overnight Repair, \$6.99.

4 Hit snooze A flattened round brush with deep vents directs hot air above *and* beneath hair for the fastest blow-out ever. Kymaro Jet Flow Styler, \$39.95.

5 One-swoosh remover It takes off your makeup cleanly, plus it contains moisturizing and antiaging ingredients. Matté Elite Bare All makeup remover, \$13.

6 A better blush Perk up dull skin with a ceramide-infused blush that delivers glowing color and a nice dose of hydration. Elizabeth Arden Ceramide Cream Blush in Pink, \$24.

7 Get polished Give yourself the season’s sexy metallic manicure without spending a second in the salon. MAC Cosmetics Cham Pale Collection Nail Lacquer in Soirée, \$13.

8 Skin help, stat! This tinted cream hydrates, covers imperfections, *and* minimizes lines—it’s like airbrushing in a tube, we swear. Miracle Skin Transformer SPF 20, \$48.

9 Rehab your lips Roll on one of these dual-action volumizing and moisturizing balms to decrease chapping and increase kissing! Own Plump Hydration Lip Therapy balms, \$14.99 each.

PRISTIQ® (desvenlafaxine) is a prescription medication approved for the treatment of major depressive disorder in adults.

Important Safety Information About PRISTIQ®

Suicidality and Antidepressant Drugs
Antidepressants increased the risk compared to placebo of suicidal thinking and behavior (suicidality) in children, teens, and young adults. Depression and certain other psychiatric disorders are themselves associated with increases in the risk of suicide. Patients of all ages who are started on antidepressant therapy or when the dose is changed should be monitored appropriately and observed closely for clinical worsening, suicidality, or unusual changes in behavior such as becoming agitated, irritable, hostile, aggressive, impulsive, or restless. Should these occur, report them to a doctor. PRISTIQ is not approved for use in children under 18.

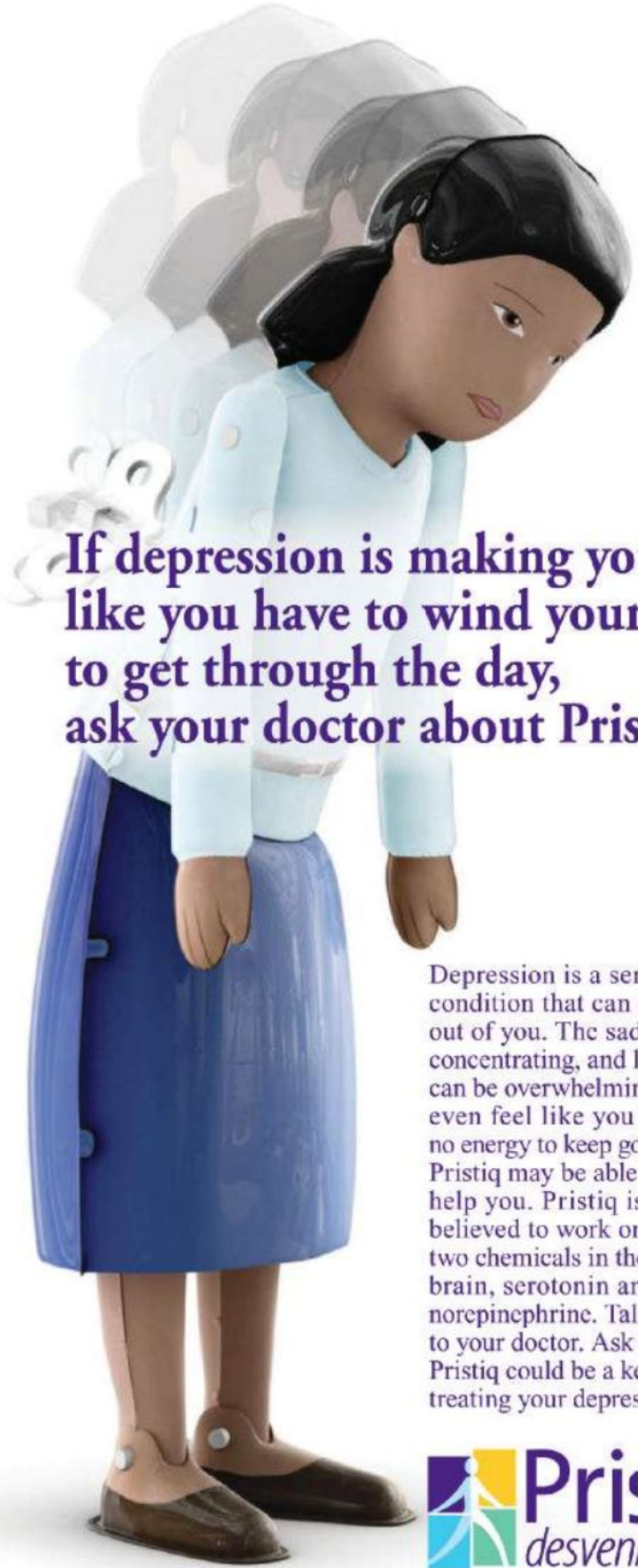
People taking MAOIs should not take PRISTIQ. Tell your healthcare professional about all prescription and over-the-counter medications you are taking or plan to take, including: medicines to treat migraines or mood disorders, to avoid a potentially life-threatening condition; and aspirin, NSAID pain relievers, or blood thinners because they may increase the risk of bleeding.

PRISTIQ may cause or make some conditions worse, so tell your healthcare professional about all your medical conditions, including:

- High blood pressure, which should be controlled before you start taking PRISTIQ and monitored regularly
- Heart problems, high cholesterol or triglyceride levels, or a history of stroke, glaucoma or increased eye pressure, kidney or liver problems, or have low sodium levels in your blood
- Mania, bipolar disorder, or seizures or convulsions
- If nursing, pregnant, or plan to become pregnant

Discontinuation symptoms may occur when stopping or reducing PRISTIQ, so talk to your healthcare professional before stopping or changing your dose of PRISTIQ. Until you see how PRISTIQ affects you, be careful driving a car or operating machinery. Avoid drinking alcohol while taking PRISTIQ. Side effects when taking PRISTIQ 50 mg may include nausea, dizziness, sweating, constipation, and decreased appetite.

Please see Brief Summary of Prescribing Information on next page.



If depression is making you feel like you have to wind yourself up to get through the day, ask your doctor about Pristiq.

Depression is a serious medical condition that can take so much out of you. The sadness, trouble concentrating, and loss of interest can be overwhelming. You may even feel like you have no energy to keep going. Pristiq may be able to help you. Pristiq is believed to work on two chemicals in the brain, serotonin and norepinephrine. Talk to your doctor. Ask if Pristiq could be a key in treating your depression.



 **Pristiq®**
desvenlafaxine
EXTENDED-RELEASE TABLETS

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Visit Pristiq.com or call 1-800-PRISTIQ (1-800-774-7847)

IMPORTANT FACTS ABOUT

Pristiq®
desvenlafaxine
EXTENDED-RELEASE TABLETS

(pris•teek')
Pristiq® -
(desvenlafaxine)
Extended-Release
Tablets

Read the Medication Guide that comes with you or your family member's antidepressant medicine. Talk to your, or your family member's, healthcare provider about:

- all risks and benefits of treatment with antidepressant medicines
- all treatment choices for depression or other serious mental illness

What is the most important information I should know about antidepressant medicines, depression and other serious mental illnesses, and suicidal thoughts or actions?

1. Antidepressant medicines may increase suicidal thoughts or actions in some children, teenagers, and young adults within the first few months of treatment.
2. Depression and other serious mental illnesses are the most important causes of suicidal thoughts and actions. Some people may have a particularly high risk of having suicidal thoughts or actions. These include people who have (or have a family history of) bipolar illness (also called manic-depressive illness) or suicidal thoughts or actions.
3. How can I watch for and try to prevent suicidal thoughts and actions in myself or a family member?

- Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts, or feelings. This is very important when an antidepressant medicine is started or when the dose is changed.
- Call the healthcare provider right away to report new or sudden changes in mood, behavior, thoughts, or feelings.
- Keep all follow-up visits with the healthcare provider as scheduled. Call the healthcare provider between visits as needed, especially if you have concerns about symptoms.

Call a healthcare provider right away if you or your family member has any of the following symptoms, especially if they are new, worse, or worry you:

- thoughts about suicide or dying
- attempts to commit suicide
- new or worse depression
- new or worse anxiety
- feeling very agitated or restless
- panic attacks
- trouble sleeping (insomnia)
- new or worse irritability
- acting aggressive, being angry or violent
- acting on dangerous impulses
- an extreme increase in activity and talking (mania)
- other unusual changes in behavior or mood

What else do I need to know about antidepressant medicines?

- **Never stop an antidepressant medicine without first talking to a healthcare provider.** Stopping an antidepressant medicine suddenly can cause other symptoms.

- **Antidepressants are medicines used to treat depression and other illnesses.** It is important to discuss all the risks of treating depression and also the risks of not treating it. Patients and their families or other caregivers should discuss all treatment choices with the healthcare provider, not just the use of antidepressants.

- **Antidepressant medicines have other side effects.** Talk to the healthcare provider about the side effects of the medicine prescribed for you or your family member.

- **Antidepressant medicines can interact with other medicines.** Know all of the medicines that you or your family member takes. Keep a list of all medicines to show the healthcare provider. Do not start new medicines without first checking with your healthcare provider.

- **Not all antidepressant medicines prescribed for children are FDA approved for use in children.** Talk to your child's healthcare provider for more information.

This Medication Guide has been approved by the U.S. Food and Drug Administration for all antidepressants.

Important Information about Pristiq

Read the patient information that comes with Pristiq before you take Pristiq and each time you refill your prescription. There may be new information. If you have questions, ask your healthcare provider. This information does not take the place of talking with your healthcare provider about your medical condition or treatment.

What is Pristiq?

- Pristiq is a prescription medicine used to treat depression. Pristiq belongs to a class of medicines known as SNRIs (or serotonin-norepinephrine reuptake inhibitors).
- Pristiq is not approved for use in children and adolescents.

Who should not take Pristiq?

Do not take Pristiq if you:

- are allergic to desvenlafaxine, venlafaxine or any of the ingredients in Pristiq.
- currently take, or have taken within the last 14 days, any medicine known as an MAOI. Taking an MAOI with certain other medicines, including Pristiq, can cause serious or even life-threatening side effects. Also, you must wait at least 7 days after you stop taking Pristiq before you take any MAOI.

What should I tell my healthcare provider before taking Pristiq?

Tell your healthcare provider about all your medical conditions, including if you:

- have high blood pressure
- have heart problems
- have high cholesterol or high triglycerides
- have a history of stroke
- have glaucoma
- have kidney problems
- have liver problems
- have or had bleeding problems
- have or had seizures or convulsions
- have mania or bipolar disorder
- have low sodium levels in your blood
- are pregnant or plan to become pregnant. It is not known if Pristiq will harm your unborn baby.
- are breastfeeding. Pristiq can pass into your breast milk and may harm your baby. Talk with your healthcare provider about the best way to feed your baby if you take Pristiq.

• Serotonin syndrome or neuroleptic malignant syndrome (NMS)-like reactions
Rare, but potentially life-threatening, conditions called serotonin syndrome or Neuroleptic Malignant Syndrome (NMS)-like reactions can happen when medicines such as Pristiq are taken with certain other medicines. Serotonin syndrome or NMS-like reactions can cause serious changes in how your brain, muscles and digestive system work.

Especially tell your healthcare provider if you take the following:

- medicines to treat migraine headaches known as triptans
- St. John's Wort
- MAOIs (including linezolid, an antibiotic)
- tryptophan supplements
- sibutramine
- tramadol
- medicines used to treat mood disorders, including tricyclics, lithium, selective serotonin reuptake inhibitors (SSRIs), or serotonin norepinephrine reuptake inhibitors (SNRIs)

Ask your healthcare provider if you are not sure whether you are taking any of these medicines.

Before you take Pristiq with any of these medicines, talk to your healthcare provider about serotonin syndrome. See "What are the possible side effects of Pristiq?"

Pristiq contains the medicine desvenlafaxine. Do not take Pristiq with other medicines containing venlafaxine or desvenlafaxine.

Switching from other antidepressants

Side effects from discontinuing antidepressant medication have occurred when patients switched from other antidepressants, including venlafaxine, to Pristiq. Your doctor may gradually reduce the dose of your initial antidepressant medication to help reduce these side effects.

What should I avoid while taking Pristiq?

- Do not drive a car or operate machinery until you know how Pristiq affects you.
- Avoid drinking alcohol while taking Pristiq.

What are the possible side effects of Pristiq?

Pristiq can cause serious side effects, including:

- See the beginning of this page.
- Serotonin syndrome or neuroleptic malignant syndrome (NMS)-like reactions. See "What should I tell my healthcare provider before taking Pristiq?"

Get medical help right away if you think that you have these syndromes. Signs and symptoms of these syndromes may include one or more of the following:

- restlessness
- hallucinations (seeing and hearing things that are not real)
- coma
- nausea
- vomiting
- confusion
- increase in blood pressure
- diarrhea
- loss of coordination
- fast heart beat
- increased body temperature
- muscle stiffness

Pristiq may also cause other serious side effects including:

- **New or worsened high blood pressure (hypertension).** Your healthcare provider should monitor your blood pressure before and while you are taking Pristiq. If you have high blood pressure, it should be controlled before you start taking Pristiq.

- **Abnormal bleeding or bruising.** Pristiq and other SNRIs/SSRIs may cause you to have an increased chance of bleeding. Taking aspirin, NSAIDs (non-steroidal anti-inflammatory drugs), or blood thinners may add to this risk. Tell your healthcare provider right away about any unusual bleeding or bruising.

- **Glaucoma (increased eye pressure)**

- **Increased cholesterol and triglyceride levels in your blood**

- **Symptoms when stopping Pristiq (discontinuation symptoms).** Side effects may occur when stopping Pristiq (discontinuation symptoms), especially when therapy is stopped suddenly. Your healthcare provider may want to decrease your dose slowly to help avoid side effects.

Some of these side effects may include:

- dizziness
- nausea
- anxiety
- irritability
- sleeping problems (insomnia)
- sweating
- abnormal dreams
- tiredness
- diarrhea
- headache

Seizures (convulsions)

- **Low sodium levels in your blood.** Symptoms of this may include headache, difficulty concentrating, memory changes, confusion, weakness, and unsteadiness on your feet. In severe or more sudden cases, symptoms can include hallucinations (seeing or hearing things that are not real), fainting, seizures and coma. If not treated, severe low sodium levels could be fatal. Contact your healthcare provider if you think you have any of these side effects.

Common side effects with Pristiq include:

- nausea
- headache
- dry mouth
- sleepiness
- dilated pupils
- insomnia
- constipation
- loss of appetite
- tremor
- diarrhea
- vomiting
- anxiety
- dizziness
- decreased sex drive
- delayed orgasm and ejaculation
- sweating
- tiredness

These are not all the possible side effects of Pristiq. Tell your healthcare provider about any side effect that bothers you or does not go away. Call your doctor for medical advice about side effects. For more information on these and other side effects associated with Pristiq, talk to your healthcare provider, visit our web site at www.pristiq.com or call our toll-free number 1-888-Pristiq.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Contact Information

Please visit our web site at www.pristiq.com, or call our toll-free number 1-888-Pristiq to receive more information. This product's label may have been updated. For current package insert and further product information, please visit www.pfizer.com or call our medical communications department toll-free at 1-800-934-5556.

Uninsured? Need help paying for Pfizer medicines?

Pfizer has programs that can help. Call 1-866-706-2400 or visit www.PfizerHelpfulAnswers.com.

**helpful
answers**



SCREEN GRAB

Wanna look like Winona?

She's back! And prettier than ever in the new romantic comedy *The Dilemma*. We asked the movie's makeup guru, Suzi Ostos, and key hairstylist, Tony Mirante, how to get Winona's luminous and, as always, adorable look.

Flawless skin: "This brush is flipping fantastic," Ostos says of the MAC makeup brush she used to buff Ryder's liquid foundation. "I toned down the redness on her chin and around her nose with a heavier base and put a lighter formula everywhere else, then used the brush to blend the two by making little circles on her skin."

Low-fuss lips: "Winona was so in love with this tinted balm that she was always sticking her fingers into the pot—even when we weren't shooting!" Ostos reports.

Casually cute hair: Mirante used a mix of mousse and thickening cream to add fullness to Ryder's hair, but he needed another trick to keep the style in place: "Winona's a tucker," says Mirante, explaining that she was constantly pushing her hair behind her ears during scenes. "So I bobby-pinned the pieces above her ears to make her more comfortable with the style."



From top: MAC Brush #187, \$42. Korres Pomegranate Lip Butter, \$10. Aquage Uplifting Foam, \$28. Living Proof Full Thickening Cream, \$24.



DO I NEED... GROWTH FACTOR IN MY SKIN CREAM?



One more to grow on: DNA EGF Renewal Growth Factor Serum, \$145.

"Anyone over 30, but especially people with rosacea or dark under-eye circles, can benefit from a growth-factor product," says Mount Kisco, NY, dermatologist David E. Bank. He points to promising preliminary research showing that topically applied growth factors (related to, but not chemically the same as, growth hormones) increase the thickness and firmness of skin while decreasing hyper-pigmentation and redness. All very encouraging—though not cheap—and a lot less scary than a needle or (gulp) a lift. Try SkinMedica TNS Recovery Complex, \$155, or Neocutis Lumière Bio-restorative Eye Cream, \$80.

Nail this trend



Lea Michele and Jessica Szohr flaunt the modern match. Polish: Orly La Playa, \$7.50.

Like color-coordinating your poodle to your car, painting your nails the same shade as your outfit can be just too matchy-matchy. But lately, stars are discovering exceptions to that rule. "Syncing your clothes and manicure works when your nails are short and dark," explains Jin Soon Choi of Jin Soon Natural Hand and Foot Spas in New York City. "Navy and deep red look especially cool."

CUSTOMIZED CARE for your HAIR

LOVE YOUR LOCKS

If you're like most women, the relationship you have with your hair is complicated. Some days you love it, while other days, not so much. With Pantene Pro-V Customized Solutions, the hair you love—and work so hard to get—can be yours every day of the week. No matter what your hair type, there's a solution just for you. Intrigued? Read on to learn more...



CURLY HAIR

Pantene knows that curly hair's twists and turns make it hard for the scalp's natural oils to travel through hair, leaving it prone to dryness, especially at the ends. Pantene Pro-V Curly Hair Series Dry to Moisturized Shampoo and Conditioner system hydrates curls for a look that's soft and defined from 9 'til 9.

TIP FROM THE TOP

"Embrace your curls, but tame your frizz," says Danilo, Pantene Celebrity Stylist. With Pantene Pro-V Curly Hair Series treatment and styling product options, you can hydrate, smooth, or define curls. Revitalize your curls with Pantene Pro-V Deep Moisturizing Treatment.



MEDIUM-THICK HAIR

Are your medium-thick strands tiring to tame? No wonder! The structure of medium-thick hair absorbs 40% more water than fine hair. With Pantene Pro-V Medium-Thick Hair Solutions Frizzy to Smooth system, you can outlast frizz, even until the second day.



TIP FROM THE TOP

"Help protect your hair from heat damage to create a healthy foundation and give it shine," says Danilo. For a quick and simple way, lightly mist your locks with Pantene Pro-V Heat Protection & Shine Spray.



COLOR HAIR

Color-treated hair is chemically altered, making extra moisture a must. Pantene Pro-V Color Hair Solutions Color Preserve Shine Shampoo and Conditioner system contains conditioners that help repair your hair's cuticle and seal in color. This protects the time and money you invest in your color by helping it stay brilliant.



TIP FROM THE TOP

"Use a cleansing and conditioning regimen specially designed for color-treated hair," says Danilo. Treat weekly with Pantene Pro-V Color Nourishing Treatment to infuse hair with moisture, provide shine, and help protect color for up to 6 weeks.



Get the look you want! Discover the right products for your hair at pantene.com/productfinder

8:00am

4:00pm

8:00pm

can your volume
pass the 4 o'clock flop test?

TRY Pantene. Flat to Volume system.* Put it to the test and see your volume last all day. Pantene found that fine hair has up to 50% less protein** and custom designed a system to give it the power to STAND UP STRONGER, STAY FULL LONGER.†

* For all day volume: Flat to Volume Shampoo & Conditioner, Root Lifter Spray-Gel and Lasting Volume Hairspray.

** vs. thick hair.

† System vs. Shampoo and Conditioner.



PANTENE PRO-V

HEALTHY MAKES IT HAPPEN

Find your solutions at pantene.com



Can't keep your paws off your face? Take our experts' advice.

Q I can't stop picking at my skin. Help!



A THE DERMATOLOGIST/PSYCHIATRIST SAYS:

"The key to stopping is figuring out why you're doing it. Picking can be an emotional reaction to anxiety—a self-soothing behavior similar to nail-biting and hair-pulling. I'll often prescribe

Amy Wechsler, M.D., dermatologist and psychiatrist in New York City and author of *The Mind-Beauty Connection*

antidepressants or anti-anxiety medications for those patients." The majority of pickers, though, just can't resist popping a zit. "In those cases, I'll do in-office extractions or use the Isolaz laser to kill bacteria and clean out pores," Wechsler says. "Or I may prescribe a topical acne cream like Retin-A, oral antibiotics, or Accutane." (Pregnant women shouldn't use Accutane; it can cause severe birth defects and must be taken under a doctor's supervision.) "Also, if you're a picker, throw out all your 'tools': tweezers, needles, and especially those awful magnifying mirrors that make you see things that no one else can."



No magnification for you, missy!



A THE BEHAVIORAL PSYCHOLOGIST SAYS:

"When you're a chronic skin picker, you have to change the thinking that justifies the act to change your behavior." Edelstein recommends daily writing exercises. "Jot down what you

Michael R. Edelstein, Ph.D., past president of the Association for Behavioral and Cognitive Therapy and author of *Three Minute Therapy*

think before you go at your face, such as, 'I'll do it just this once and never again,' and then write down why that's not true," he says. Taking a step back to examine your justification—because you're having a bad day, for example—will help you see that picking won't solve your problem or alleviate your stress in the long term. Edelstein also offers these practical tips for quitting: Keep your nails short, wear a rubber band around your wrist and snap it whenever you get the urge, and designate your guy as a "bathroom buddy" to keep you company while you wash your face until your skin clears up.



Oh, snap!



A THE MAKEUP ARTIST SAYS:

"Makeup doesn't really stick to open cuts, so before you pick, stop and think about how bad it's going to look. If the damage is already done, your best bet is a very dense and highly

Pati Dubroff, makeup artist to Katherine Heigl, Drew Barrymore, and Liv Tyler

pigmented concealer like Clarins Concealer Stick, \$25, which you dot around the sides and blend inward with a brush." But if a spot is really raw, Dubroff insists that you go makeup-free until it heals. "Cover it with Neosporin and a small flesh-colored Band-Aid," she says. "And if anyone asks, just say, 'Oh, I needed to have something zapped.' But please, quit the habit before you wind up with permanent, hard-to-cover scars!"

—AMANDA MAY DUNDAS



Quick cover.

Vaseline.

WE'RE ON A MISSION TO RESCUE DRY SKIN.

VASELINE® INTENSIVE RESCUE®

ACCELERATES HEALING  NON-GREASY MOISTURE

We're against dry skin. That's why we gave Vaseline® Intensive Rescue® to women who were constantly searching online for a solution to their dry skin. The results are in - women across the web reported that their skin was healed without the greasiness. But our mission won't be over until we eliminate dry skin for every woman, everywhere.

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HEALTHY YOU GUY KIDS

STAY-WELL NEWS FOR YOU AND EVERYONE YOU LOVE

Make
2011
your
“I did it!”
year

Whatever she
did, we're
proud of her!

Forget grand, sweeping promises that quickly flame out (starting today, no more cookies—ever!). It's time to focus on one simple health change you can stick with, like these readers. Here's help:

I want to... quit sipping diet soda

“My mom has osteoporosis, and her doctor told her to give up soft drinks because they may weaken bones. I have a daily diet soda habit, and want to avoid the same fate.” —ANN WHITE, 28, OKLAHOMA CITY

Your game plan: First, relax. No cold turkey! Ramping down gradually is the best way to quit any dietary habit, says dietitian Keri Gans, R.D. Start by subbing a different brand for your usual fix. Why? “You won't love it quite as much, making it easier to

cut down,” Gans says. After a few days, stop at half a can per day. After another week, go to every other day for a while. At that point, your habit has been thoroughly interrupted and you can drop the stuff completely or switch to sparkling water with lemon.

I want to... run a 5K race

“Last year I walked a race, and now I want to run one! But when I try, I get out of breath quickly and stop.” —LIZ MOORE, 47, CARSON CITY, NV

Your game plan: Instead of running until you're pooped and then stopping—that only gets you in the habit of quitting—mix short intervals of running with walking three times a week to build stamina, says Matthew Goodemote, a beginning ➔



If there's one thing you deserve, it's more time in bed!

running coach in Gloversville, NY. Warm up with a five-minute walk, then alternate 30 seconds of jogging with 30 seconds of walking for a mile and a half. Add 30 seconds to the run portions and a half mile to your distance each week. In a month, you'll be up to three miles, jogging a majority of the time. Add the excitement of race day, and you'll fly through 3.1 miles!

I want to... get more sleep

"My husband and I plop in front of the TV with our computers and before I know it, it's after 11 p.m. Then, once I get to bed, my brain won't shut off." —CHRISTINE GRITMON, 30, PEARL RIVER, NY

Your game plan: Cozying up to *Friends* reruns may seem like the perfect way to unwind, but light from television and computer screens disrupts your internal clock and makes it hard to doze off, says Lisa Shives, M.D., a specialist at Northshore Sleep Medicine in Evanston, IL. Her advice: Figure out what time you need to get up and count back seven or eight hours; that's your bedtime. An hour before that is your *TV's* bedtime—same for laptops. Spend that time winding down or reading instead.

I want to... never take another puff

"I quit smoking when I got pregnant, but after I had my son, stress got the best of me and now I smoke a few cigarettes a day. I want to set a better example. Help!" —BEVERLY RIVERA, 28, ATLANTA

Your game plan: Thirty-nine percent of puffers say they're "occasional smokers," but even that raises your risk of cancer and heart disease. Drugs and patches are overkill for light users, says Saul Shiffman, Ph.D., who studies social smokers at the University of Pittsburgh, but here's what works: Pick a quit date and tell people about it. Then, when stress strikes, ask yourself what, other than lighting up, might help. A quick walk? Texting a friend? If the craving doesn't pass, pop a piece of nicotine gum or a lozenge—but no more than two a day. "Once you make it to 30 days, your chances of quitting for good go up significantly," Shiffman says.

—NATALIE GINGERICH MACKENZIE

MAN MEDICINE

My husband literally gets depressed and sick if his team loses. Is he crazy?



"He may be a superfan, but he's not nuts. People create their senses of identity based on many factors—family, religion, ethnicity, even what teams we support. As a result, when your guy's favorite football team plays, in some ways a part of himself is on the line. Research has found that fans of winning teams reported higher self-esteem and were more optimistic than those whose teams got trounced. The next time his guys get beat, try to give him a break—and up to a day to rebound." —EDWARD R. HIRT, PH.D., PROFESSOR OF PSYCHOLOGY AT INDIANA UNIVERSITY

HUH?
CAN'T
HEAR
YOU,
MOM!



Maybe he's not ignoring you after all: A new study by researchers at Brigham and Women's Hospital in Boston found that hearing loss among tweens and adolescents has increased by 30 percent in the last

PHOTO CREDIT



ASK THE DOCTORS:

PREGNANT WOMEN CAN DRINK? REALLY?

Vino-loving moms-to-be cheered when a recent British study found that a drink a week might be okay. But don't raise a glass just yet: "We don't know how much alcohol may be safe, but we *do* know that too much has detrimental affects, from preterm labor to brain damage," says ob/gyn Lisa Masterson, M.D. Another reason to abstain? People are often worse at tracking their intake than they think. "Doctors are taught to take the amount someone says they drink and double it!" she says. Her bottom line: "Don't feel guilty about a little sip on New Year's, but don't make it a habit either."



Lisa Masterson is an ob/gyn and cohost of the syndicated talk show *The Doctors*. Check your local listings for times.

Send your health questions to askthedoctors@redbookmag.com.



HEY, IT'S TIME TO SEE THE DENTIST

We all know we're supposed to get our teeth cleaned twice a year and have an annual dental exam. But at least 27 percent of women ignore that advice, according to the Centers for Disease Control and Prevention. Need a reason to make the appointment? Women who visit the dentist at least once every couple of years are 33 percent less likely to suffer from stroke or heart attack than those who don't, reports a new study from the University of California, Berkeley. The link isn't entirely clear, but diseased gums can lead to general inflammation in the body, which in turn hurts your heart and blood vessels. No dental coverage? A dental school in your area may offer low-cost treatment from students, under the supervision of experienced dentists.

—ERIN HOBDAY



The trouble with "natural" cold medicines for kids

After last year's recall of children's Tylenol and Benadryl, it's no surprise that more moms are turning to kids' formulations of homeopathic cold remedies, like Chestal and Oscillococcinum. About one in nine American children regularly takes such a cure, according to a study by the National Center for Complementary and Alternative Medicine (NCCAM). But they're controversial: There is limited research on the safety of homeopathic drugs and shaky evidence as to whether they work, according to NCCAM. In fact, one recent study reported that homeopathic zinc nasal gels might damage people's sense of smell, and last fall homeopathic teething tablets from Hylands were recalled because they didn't contain a uniform amount of the active ingredient. "Many parents try alternative therapies without their doctor's knowledge," says pediatrician Ari Brown, M.D., author of *Baby 411*. "Your best bet is to be cautious and talk to your child's doctor about any treatment you want to try." —SARAH JIO

two decades. Today, an incredible **19 percent** of kids ages 12 to 19 are believed to have some level of hearing damage. Noisy video games and music blasting through earbuds could be to blame. "Any sound over 85 decibels

can be unsafe—and some MP3 players can go up to 120 decibels," says audiologist Sharon Curhan, M.D., one of the study's authors. To launch a save-your-ears campaign at your house, try setting volume and time limits on tunes.

Volume on MP3 players should be kept to 60 to 75 percent of their maximum, and kids should rock out for no more than 90 minutes a day, says Curhan: "After exposure to loud noise, the ear needs time to rest and recover." —S.J.

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shine sass
pizzazz oomph sparkle
excitement
confidence
peace
hope guts momentum
resolve pep
nerve spirit

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LAZY WOMAN'S FITNESS



THE BETTER-THAN-NOTHING UPPER-BODY WORKOUT

Squeeze in some exercise while you wait for the oven (or, let's be real, the microwave) timer to tick down with this move from New York City trainer and busy mom Andrea Mitchell. (That's her in the photos!) These kitchen-counter push-ups tone your arms, abs, and chest.

A. Place your hands on the edge of the counter, walk your feet back several steps so your body forms a straight line from your heels to the top of your head, then rise up onto your toes, as shown.

B. Pull your belly button in and up, then bend your elbows and slowly lower your body toward the counter until your chest is a few inches from your hands. Pause, then straighten your arms, as if pushing the counter away. Repeat 10 times. That's one set; aim for three sets.

SPORTS BRAS YOUR GIRLS WILL LOVE

What did your breasts do to deserve that pinchy, saggy, or butt-ugly sports bra? Seriously, it's time for an upgrade! A new Australian study revealed that the best bras lift and compress the chest, so we tested 13 new styles that do. Here, our staffer faves.

				
	Nike Swift U-Back; \$50, nike.com	Moving Comfort Juno; \$52, movingcomfort.com	Enell sports bra; \$66, enell.com	Champion Double Dry Modern Fitness; \$20, championusa.com
CUTENESS	Sporty-chic! "Even the hubby noticed and said it looked sexy!" one tester said.	Keyhole cutouts on the back look pretty and keep you cool. "I want to buy 20!" said our 32D tester.	Granny panties, meet your match.	Simple, but we love all the fun, bright colors and patterns.
SUPPORT	Molded cups lift breasts and "entirely eliminate bounce," said one 34C tester.	"Practically zero bounce on a five-mile run, which is tough for D cups," our tester said.	The thick fabric keeps breasts in place; a high neckline controls cleavage.	"A bit bouncy, so I wouldn't wear it for serious crime-fighting," said one 34D tester.
COMFORT	Nike's Dri-Fit fabric wicks moisture away, and ergonomic seams totally nix chafing.	We liked the adjustable straps (they don't dig into your shoulders) and supersoft cups.	The less-breathable fabric made one 38DD tester "uncomfortably hot."	"Soft enough to sleep in!" one 32D tester said. Plus, the mesh racerback is cool.
BEST FOR	High-impact workouts, like jogging or running.	Running, jogging, kickboxing or any other high-impact cardio.	Women with D cups or larger—no wonder Mad Men's Christina Hendricks is a fan.	Smaller-breasted gals or low-impact stuff like walking, Pilates, or biking. —LAUREL LEIGHT

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SNACK 1: Special K™ Cereal Bar



MEAL 2: Special K™ Protein Shake



SNACK 2: Special K™ Crackers



MEAL 3: Skillet shrimp
with tomatoes and feta

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No topic is taboo to ob/gyn Hilda Hutcherson, M.D. Go on, send her the Q's you've never asked *anyone*.

Dr. Hutcherson is an ob/gyn and a professor at Columbia University in New York City. Email her at askhilda@redbookmag.com.

Q *I just tested positive for one of the high-risk strains of HPV. I've been married for 10 years—how could this happen? Did he cheat?*

A I can't tell you how many times I get this question. It's understandable that you might worry your husband was unfaithful, became infected with the human papillomavirus (HPV), and passed it on to you. But let me be crystal clear: That's not necessarily the case. More than 80 percent of women will be exposed to HPV by age 50—and much like other viruses, it can remain dormant in your body for years. It's entirely possible to have a negative test one year and a positive one the following year, even if you were exposed a decade ago. As your doctor has probably explained to you, carrying a high-risk strain increases your risk of cervical cancer, so be absolutely sure to get a Pap smear and HPV test annually. HPV usually clears up on its own, but if yours does not, or your Pap becomes abnormal, you may need additional testing, like a colposcopy or biopsy. That said, simply having a high-risk strain doesn't automatically mean you will get cancer. Just be vigilant and follow doctor's orders!



An HPV test can be done with your regular Pap. Ask your ob/gyn for it.

CASE HISTORY: MENOPAUSE AT AGE 36?

So often when patients in their 30s have strange symptoms, like irregular periods, they ask me in a panic: Could it be premature menopause? The vast majority of the time, the answer is no. Premature menopause is rare and occurs in only one in 100 women in their 30s; the average age for "the change" is 51. But I still recall one memorable patient who came to see me at age 36 because she was having trouble getting pregnant. She had just started a stressful job, wasn't sleeping enough, and had shed 30 pounds, so she assumed tension and weight loss were to blame when she stopped having her

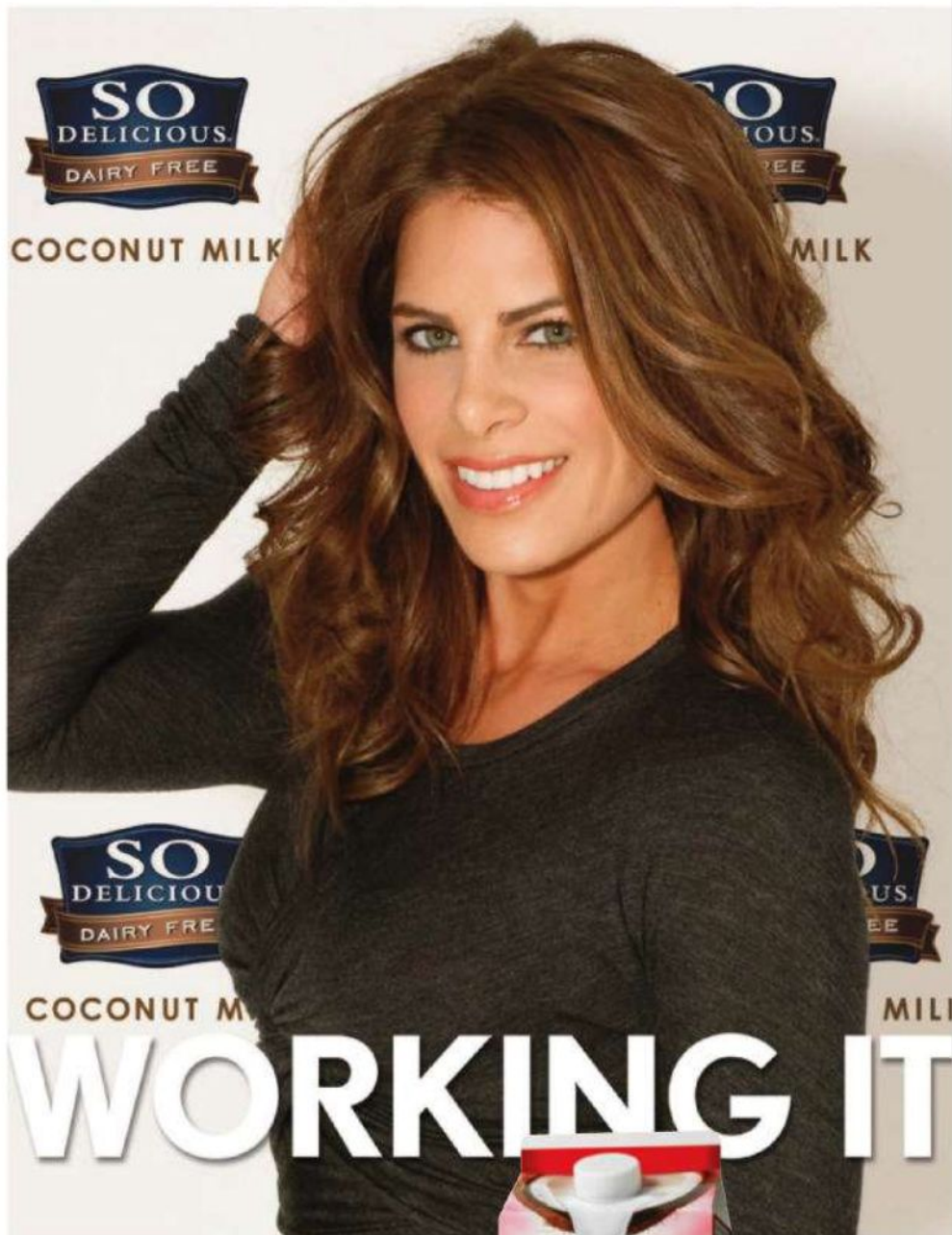
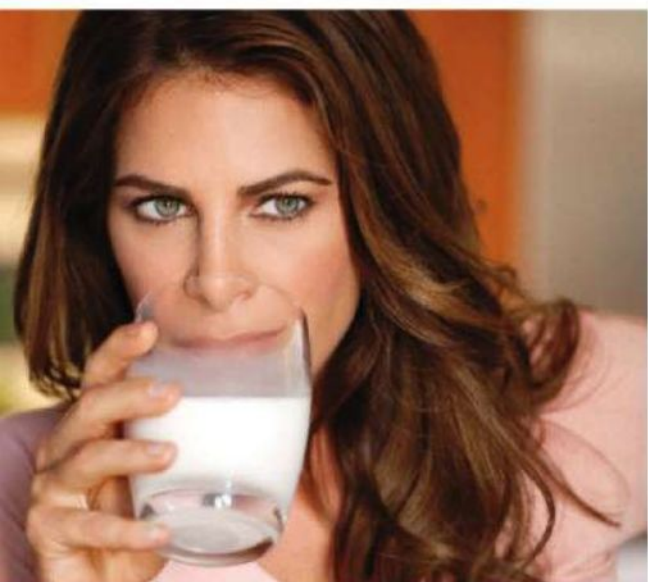
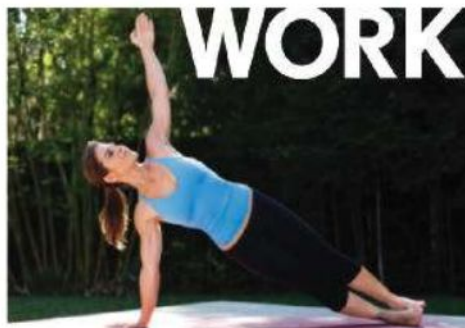


"Mommy and Daddy were just playing horsey."

Q *My 10-year-old walked in on my husband and me in bed, and ever since I've been paranoid about having sex and can't seem to relax! How do I get back in the mood?*

A I swear that my first child seemed to know instinctively the exact moment my husband and I would decide to get busy. It can be embarrassing, but what I call "sexus interruptus" happens to almost everyone with children. You can't let the incident freeze up your sex life. My suggestion: Go away for the weekend sometime soon, or send the kids to Grandma's house. That way, there is no chance of being interrupted, and you and your husband can break the sexual ice. Back in real life, try scheduling sex (as *unsexy* as that sounds) for the times when your kids are asleep or at activities. Oh, and put a lock on your bedroom door. Sex is important for strengthening the bond in a marriage, and pleasure is also key for your physical and emotional health. You deserve it!

period. But a blood test revealed that her levels of follicle-stimulating hormone (a substance released by your ovaries in preparation for ovulation) was in the menopausal range. She was devastated, and I referred her to a reproductive endocrinologist—a hormone specialist. If you're having irregular periods, don't freak out, but you should always check in with your ob/gyn. And if you have a family history of early menopause, you should let your doctor know. Luckily, this case history has a happy ending: My patient did eventually get pregnant, with the help of a donor egg and in vitro fertilization.



Jillian Michaels, America's toughest trainer, nutritional expert, TV star, fitness god, best-selling author, cruise director, celebrity, Chihuahua rescuer, cover girl,

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For moderate to severe RA

I HAVE RHEUMATOID ARTHRITIS.



Your results may vary. In medical studies, ENBREL was shown to be effective in about 2 out of 3 adults with moderate to severe rheumatoid arthritis (RA) who used it, and has been shown to begin working in as few as 2 weeks, with most patients receiving benefit within 3 months. In an RA medical study, 55% of patients had no progression of joint damage.

Please see Important Safety Information below and Medication Guide on the back of the following page.

ENBREL is indicated for reducing signs and symptoms, keeping joint damage from getting worse, and improving physical function in patients with moderate to severe rheumatoid arthritis. ENBREL can be taken with methotrexate or used alone.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about ENBREL?

ENBREL is a medicine that affects your immune system. ENBREL can lower the ability of your immune system to fight infections. Serious infections have happened in patients taking ENBREL. These infections include tuberculosis (TB) and infections caused by viruses, fungi, or bacteria that have spread throughout the body. Some patients have died from these infections. Your doctor should test you for TB before you

take ENBREL and monitor you closely for TB before, during, and after ENBREL treatment, even if you have tested negative for TB.

There have been some cases of unusual cancers reported in children and teenage patients who started using tumor necrosis factor (TNF) blockers before 18 years of age. Also, for children, teenagers, and adults taking TNF blockers, including ENBREL, the chances of getting lymphoma or other cancers may increase. Patients with RA or psoriasis may be more likely to get lymphoma.

Before starting ENBREL, tell your doctor if you:

- Have any existing medical conditions
- Are taking any medicines, including herbals
- Think you have, are being treated for, have signs of, or are prone to infection. You should

not start taking ENBREL if you have any kind of infection, unless your doctor says it is okay

- Have any open cuts or sores
- Have diabetes or an immune system problem
- Have TB or have been in close contact with someone who has had TB
- Were born in, lived in, or traveled to countries where there is more risk for getting TB. Ask your doctor if you are not sure
- Live or have lived in certain parts of the country (such as, the Ohio and Mississippi River valleys, or the Southwest) where there is a greater risk for certain kinds of fungal infections, such as histoplasmosis. These infections may develop or become more severe if you take ENBREL. If you don't know if histoplasmosis or other fungal infections are common in the areas where you live or have lived, ask your doctor

www.enbrel.com

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I ALSO HAVE A LIFE.



If you suffer from moderate to severe RA, it can seem as though your life has been split in two. ENBREL can help bridge the gap.

ENBREL can reduce the pain, stiffness, and fatigue that's stopping you. It can also help keep joint damage from getting worse. ENBREL is given by injection. ENBREL was the first medicine of its kind approved for moderate to severe RA and is the number-one most prescribed biologic by rheumatologists for RA.* So you can experience another side of RA, and get closer to the life you want to live.

Ask your rheumatologist about ENBREL today. To learn about RA, ENBREL, and patient support call: 1-888-4ENBREL and visit Enbrel.com.

*Based on monthly prescription data from IMS NPA for September 2009 and a 6-month interval of NDTI data for projected drug uses as of August 2009 for biologic agents approved for moderate to severe RA.

- Have or have had hepatitis B
- Have heart failure
- Develop symptoms such as persistent fever, bruising, bleeding, or paleness while taking ENBREL
- Use the medicine Kineret® (anakinra), Orencia® (abatacept), or Cytoxan® (cyclophosphamide)
- Are taking anti-diabetic medicines
- Have or develop a serious nervous disorder, seizures, any numbness or tingling, or a disease that affects your nervous system such as multiple sclerosis or Guillain-Barré syndrome
- Are scheduled to have surgery
- Have recently received or are scheduled for any vaccines. All vaccines should be brought up-to-date before starting ENBREL. Patients taking ENBREL should not receive live vaccines.
- Are allergic to rubber or latex
- Are pregnant, planning to become pregnant,

or breastfeeding

- Have been around someone with chicken pox

What are the possible side effects of ENBREL?

ENBREL can cause serious side effects including: **Infections**, including serious infections like TB; **hepatitis B** can become active if you already have had it; **nervous system problems**, such as multiple sclerosis, seizures, or inflammation of the nerves of the eyes; **blood problems** (some fatal); new or worsening **heart failure**; new or worsening **psoriasis**; **allergic reactions**; **autoimmune reactions**, including a lupus-like syndrome and autoimmune hepatitis.

Common side effects include: Injection site reactions, upper respiratory infections (sinus infections), and headache.

These are not all the side effects with ENBREL.

Tell your doctor about any side effect that bothers you or does not go away.

If you have any questions about this information, be sure to discuss them with your doctor. You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Please see Medication Guide on the next page.



Get closer to the life you want to live



Medication Guide Enbrel® (en-brel) (etanercept)

Read the Medication Guide that comes with Enbrel before you start using it and each time you get a refill. There may be new information. This Medication Guide does not take the place of talking with your doctor about your medical condition or treatment. It is important to remain under your doctor's care while using Enbrel.

Enbrel is a prescription medicine called a Tumor Necrosis Factor (TNF) blocker that affects your immune system.

What is the most important information I should know about Enbrel?

Enbrel may cause serious side effects, including:

1. Risk of infection

Enbrel can lower the ability of your immune system to fight infections. Some people have serious infections while taking Enbrel. These infections include tuberculosis (TB), and infections caused by viruses, fungi, or bacteria that spread throughout their body. Some people have died from these infections.

- Your doctor should test you for TB before starting Enbrel.
- Your doctor should monitor you closely for symptoms of TB during treatment with Enbrel even if you tested negative for TB.
- Your doctor should check you for symptoms of any type of infection before, during, and after your treatment with Enbrel.

You should not start taking Enbrel if you have any kind of infection unless your doctor says it is okay.

2. Risk of cancer

- There have been cases of unusual cancers in children and teenage patients who started using TNF-blocking agents at less than 18 years of age.
- For children, teenagers, and adults taking TNF-blocker medicines, including Enbrel, the chances of getting lymphoma or other cancers may increase.
- People with rheumatoid arthritis or psoriasis, especially those with very active disease, may be more likely to get lymphoma.

Before starting Enbrel, be sure to talk to your doctor:

Enbrel may not be right for you. Before starting Enbrel, tell your doctor about all of your medical conditions, including:

Infections – tell your doctor if you:

- have an infection. (See "What is the most important information I should know about Enbrel?")
- are being treated for an infection.
- think you have an infection.
- have symptoms of an infection such as fever, sweats or chills, cough or flu-like symptoms, shortness of breath, blood in your phlegm, weight loss, muscle aches, warm, red, or painful areas on your skin, sores on your body, diarrhea or stomach pain, burning when you urinate or urinating more often than normal, and feel very tired.
- have any open cuts on your body.
- get a lot of infections or have infections that keep coming back.
- have diabetes, HIV, or a weak immune system. People with these conditions have a higher chance for infections.
- have TB, or have been in close contact with someone with TB.
- were born in, lived in, or traveled to countries where there is a risk for getting TB. Ask your doctor if you are not sure.
- live, have lived in, or traveled to certain parts of the country (such as the Ohio and Mississippi River valleys, or the Southwest) where there is a greater risk for getting certain kinds of fungal infections (histoplasmosis, coccidioidomycosis, blastomycosis). These infections may happen or become more severe if you use Enbrel. Ask your doctor if you do not know if you live or have lived in an area where these infections are common.
- have or have had hepatitis B.

Also, BEFORE starting Enbrel, tell your doctor:

- About all the medicines you take including prescription and nonprescription medicines, vitamins and herbal supplements including:
 - ✓ **Orencia® (abatacept) or Kineret® (anakinra).** You have a higher chance for serious infections when taking Enbrel with Orencia® or Kineret®.
 - ✓ **Cyclophosphamide (Cytoxan®).** You may have a higher chance for getting certain cancers when taking Enbrel with cyclophosphamide.
 - ✓ **Anti-diabetic Medicines.** If you have diabetes and are taking medication to control your diabetes, your doctor may decide you need less anti-diabetic medicine while taking Enbrel.

Keep a list of all your medications with you to show your doctor and pharmacist each time you get a new medicine. Ask your doctor if you are not sure if your medicine is one listed above.

Other important medical information you should tell your doctor BEFORE starting Enbrel, includes if you:

- have or had a nervous system problem such as multiple sclerosis or Guillain-Barré syndrome.
- have or had heart failure.
- are scheduled to have surgery.
- have recently received or are scheduled to receive a vaccine.
 - ✓ all vaccines should be brought up-to-date before starting Enbrel.
 - ✓ people taking Enbrel should not receive live vaccines.
 - ✓ ask your doctor if you are not sure if you received a live vaccine.
- are allergic to rubber or latex.
 - ✓ the needle covers on the single-use prefilled syringes and the single-use prefilled SureClick® autoinjectors contains dry natural rubber.
- have been around someone with varicella zoster (chicken pox).
- are pregnant or plan to become pregnant. It is not known if Enbrel will harm your unborn baby.
 - ✓ **Pregnancy Registry:** Amgen has a registry for pregnant women who take Enbrel. The purpose of this registry is to check the health of the pregnant mother and her child. Talk to your doctor if you are pregnant and contact the registry at 1-877-311-8972.

- are breastfeeding or plan to breastfeed. It is not known if Enbrel passes into your breast milk. You and your doctor should decide if you will take Enbrel or breast feed. You should not do both.

See the section "What are the possible side effects of Enbrel?" below for more information.

What is Enbrel?

Enbrel is a prescription medicine called a Tumor Necrosis Factor (TNF) blocker.

Enbrel is used to treat:

- **moderately to severely active rheumatoid arthritis (RA).** Enbrel can be used alone or with a medicine called methotrexate.
- **psoriatic arthritis.** Enbrel can be used alone or with methotrexate.
- **ankylosing spondylitis (AS).**
- **chronic moderate to severe plaque psoriasis in adults ages 18 years and older.**
- **moderately to severely active polyarticular juvenile idiopathic arthritis (JIA) in children ages 2 years and older.**

You may continue to use other medicines that help treat your condition while taking Enbrel, such as nonsteroidal anti-inflammatory drugs (NSAIDs) and prescription steroids, as recommended by your doctor.

Enbrel can help reduce joint damage and the signs and symptoms of the above mentioned diseases. People with these diseases have too much of a protein called tumor necrosis factor (TNF), which is made by your immune system. Enbrel can reduce the effect of TNF in the body and block the damage that too much TNF can cause, but it can also lower the ability of your immune system to fight infections. See "What is the most important information I should know about Enbrel?" and "What are the possible side effects of Enbrel?"

Who should not use Enbrel?

Do not use Enbrel if you:

- have an infection that has spread through your body (sepsis).

How should I use Enbrel?

- Enbrel is given as an injection under the skin (subcutaneous or SC).
- If your doctor decides that you or a caregiver can give the injections of Enbrel at home, you or your caregiver should receive training on the right way to prepare and inject Enbrel. Do not try to inject Enbrel until you have been shown the right way by your doctor or nurse.
- Enbrel is available in the forms listed below. Your doctor will prescribe the type that is best for you.
 - Single-use Prefilled Syringe
 - Single-use Prefilled SureClick Autoinjector
 - Multiple-use Vial
- See the detailed "Patient Instructions for Use" with this Medication Guide for instructions about the right way to store, prepare, and give your Enbrel injections at home.
- Your doctor will tell you how often you should use Enbrel. Do not miss any doses of Enbrel. If you forget to use Enbrel, inject your dose as soon as you remember. Then, take your next dose at your regular(y) scheduled time. In case you are not sure when to inject Enbrel, call your doctor or pharmacist. Do not use Enbrel more often than as directed by your doctor.
- Your child's dose of Enbrel depends on his or her weight. Your child's doctor will tell you which form of Enbrel to use and how much to give your child.

What are the possible side effects of Enbrel?

Enbrel can cause serious side effects, including:

See "What is the most important information I should know about Enbrel?"

- **Infections.** Enbrel can make you more likely to get infections or make any infection that you have worse. Call your doctor right away if you have any symptoms of an infection. See "Before starting Enbrel, be sure to talk to your doctor" for a list of symptoms of infection.
- **Hepatitis B infection** in people who carry the virus in their blood. If you are a carrier of the hepatitis B virus (a virus that affects the liver),

the virus can become active while you use Enbrel. Your doctor may do a blood test before you start treatment with Enbrel and while you use Enbrel.

- **Nervous system problems.** Rarely, people who use TNF-blocker medicines have developed nervous system problems such as multiple sclerosis, seizures, or inflammation of the nerves of the eyes. Tell your doctor right away if you get any of these symptoms: numbness or tingling in any part of your body, vision changes, weakness in your arms and legs, and dizziness.
- **Blood problems.** Low blood counts have been seen with other TNF-blocker medicines. Your body may not make enough of the blood cells that help fight infections or help stop bleeding. Symptoms include fever, bruising or bleeding very easily, or looking pale.
- **Heart failure** including new heart failure or worsening of heart failure you already have. New or worse heart failure can happen in people who use TNF-blocker medicines like Enbrel. If you have heart failure your condition should be watched closely while you take Enbrel. Call your doctor right away if you get new or worsening symptoms of heart failure while taking Enbrel, such as shortness of breath or swelling of your lower legs or feet.
- **Psoriasis.** Some people using Enbrel developed new psoriasis or worsening of psoriasis they already had. Tell your doctor if you develop red scaly patches or raised bumps that may be filled with pus. Your doctor may decide to stop your treatment with Enbrel.
- **Allergic reactions.** Allergic reactions can happen to people who use TNF-blocker medicines. Call your doctor right away if you have any symptoms of an allergic reaction. Symptoms of an allergic reaction include a severe rash, a swollen face, or trouble breathing.
- **Autoimmune reactions, including:**
 - ✓ **Lupus-like syndrome.** Symptoms include a rash on your face and arms that gets worse in the sun. Tell your doctor if you have this symptom. Symptoms may go away when you stop using Enbrel.
 - ✓ **Autoimmune hepatitis.** Liver problems can happen in people who use TNF-blocker medicines, including Enbrel. These problems can lead to liver failure and death. Call your doctor right away if you have any of these symptoms: feel very tired, skin or eyes look yellow, poor appetite or vomiting, pain on the right side of your stomach (abdomen).

Common side effects of Enbrel include:

- **Injection site reactions** such as redness, swelling, itching, or pain. These symptoms usually go away within 3 to 5 days. If you have pain, redness, or swelling around the injection site that doesn't go away or gets worse, call your doctor.
- **Upper respiratory infections** (sinus infections).
- **Headache.**

These are not all the side effects with Enbrel. Tell your doctor about any side effect that bothers you or does not go away.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

How should I store Enbrel?

- Store Enbrel in the refrigerator at 36° to 46°F (2° to 8°C).
- Do not freeze.
- Do not shake.
- Keep Enbrel in the original carton to protect from light.
- Keep Enbrel and all medicines out of the reach of children.

General Information about Enbrel

Medicines are sometimes prescribed for purposes not mentioned in a Medication Guide. Do not use Enbrel for a condition for which it was not prescribed. Do not give Enbrel to other people, even if they have the same condition. It may harm them.

This Medication Guide summarizes the most important information about Enbrel. If you would like more information, talk with your doctor. You can ask your doctor or pharmacist for information about Enbrel that was written for healthcare professionals. For more information call, 1-888-4ENBREL (1-888-436-2735).

What are the ingredients in Enbrel?

Single-use Prefilled Syringe and the Single-use Prefilled SureClick Autoinjector:

Active Ingredient: etanercept

Inactive Ingredients: sucrose, sodium chloride, L-arginine hydrochloride and sodium phosphate

Multiple-use Vial:

Active Ingredient: etanercept

Inactive Ingredients: mannitol, sucrose, tromethamine v5

Issue Date: 10/2010

This Medication Guide has been approved by the US Food and Drug Administration.

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redbook notebook

what's new, noteworthy & now

january

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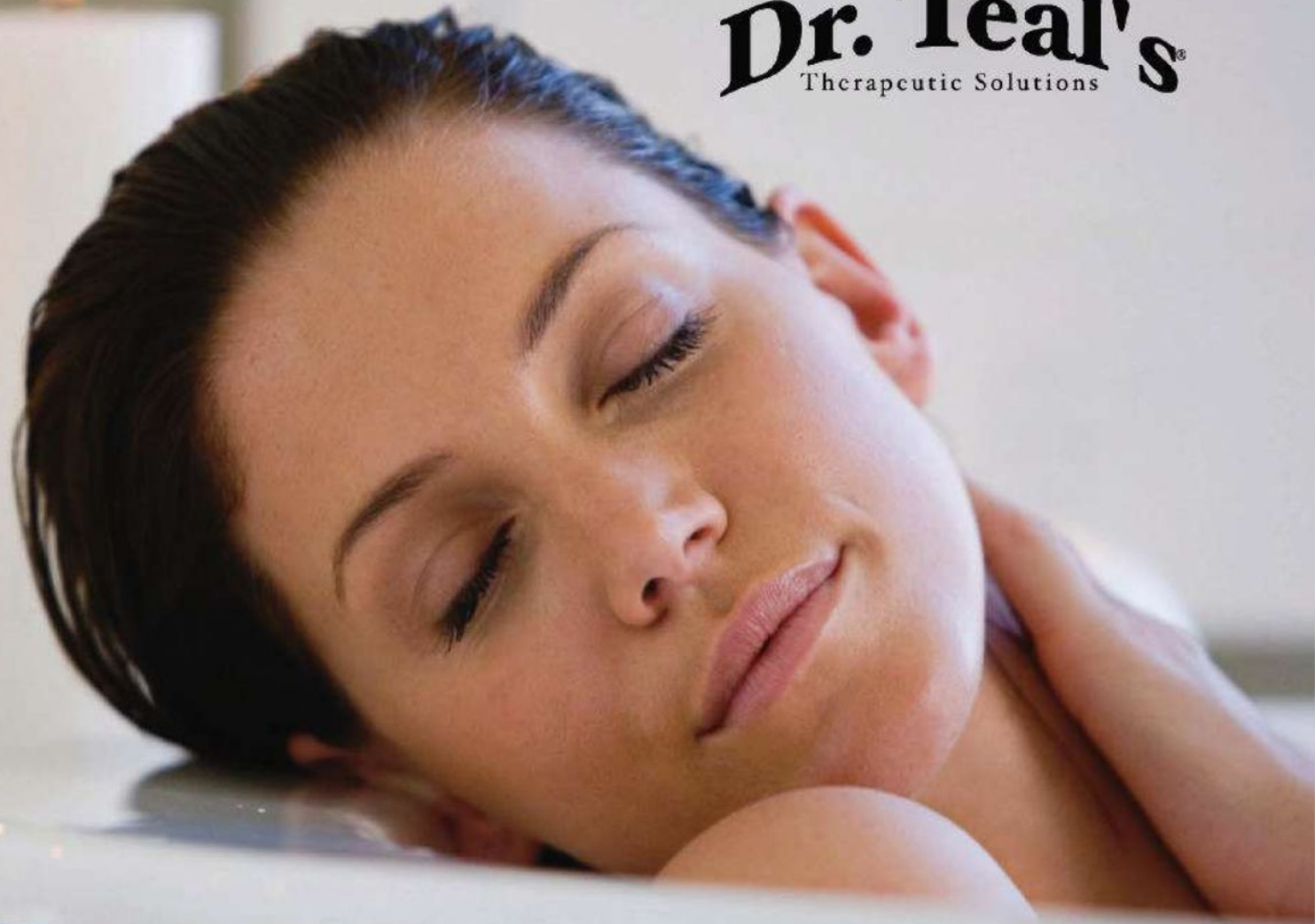
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MEN, LOVE & FAMILY

HONEST TALK ABOUT RELATIONSHIPS

TELL THE TRUTH:

Baby-making sex — FUN or WORK?

No, honey, it's way too soon to pee on a stick!

"Fun for him, with a touch of work for me. We tried for a few months, and then a friend told me to put my legs in the air for 15 minutes afterward. I doubled that to a half hour. Burim thought I was nuts, but we got pregnant!"



—ADA QAZIMI, 26, married 6 years to BURIM

"A little bit of both. I planned all four of our kids; I'm quite calculating like that. They're 4, 6, 8, and 10 years old, and I wanted them to be two years apart. Every time the last one turned 15 months, I'd say, 'It's time!' Luckily, my husband was always up for it."



—FAITH RENOULT, 34, married 16 years to BRAD

"Honestly, it was sex as usual for us. We decided we wanted to have a baby, but we didn't mark the calendar or anything like that. We didn't end up having to really 'try' at all—we found out we were pregnant after one month!"



—POOJA ASHAR, 33, married 8 years to JAY

IS A FRIEND'S DIVORCE BAD FOR YOUR MARRIAGE?

It could be—if you let it.

Researchers recently analyzed data on 12,000 people in one city and found that women with a close friend who'd split up had a

147 percent greater chance of divorcing in the next four years.

So, yes, divorce may be kind of contagious. "I see this all the time," says marriage therapist Michele Weiner-Davis, author of *Divorce Busting*. "The empathy you feel for a friend can cause you to project her marital issues onto your own relationship." The antidote? "First, remember that no two marriages are identical," she says. It is, however, natural for doubts to arise, so "use this as an opportunity to talk with your partner about any aspects of your relationship that may need work." The easiest defensive move is to compensate by spending some time with happy couples. "Loving marriages are also contagious," she says, "so hanging around couples who have a strong bond can reinforce your own." —NICOLE YORIO



Coincidence? Pals Laura Dern and Courteney Cox both recently split from their husbands.



Dern and Ben Harper
"It's funny, a lot of really close friends are kind of going through this right now," Cox said recently.



Cox and David Arquette

WANNA GET LUCKY?

Drink this next date night

It's well known that the more a guy drinks, the limper (heh) his performance can be in bed. The same might be true for us: One study found that a woman's ability to orgasm drops with each alcoholic drink she sips. Coffee, experts say, may have the opposite effect. (In another study, female rats given caffeine were all over their rodent partners.) We're still waiting for a ladies' Viagra, but in the meantime, say yes to coffee after dinner with your guy!



Love life road test: The online relationship ref

At couplespark.com, disagreeing couples post both sides of an argument and let commenters decide who's right. Did crowd-sourcing a fight help these pairs make peace?

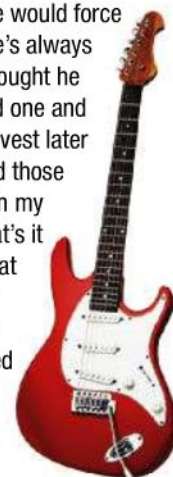
COUPLE #1 C.A. and A.A., East Hanover, NJ

We posted about my husband's insistence on texting me instead of calling. He says that's how he communicates with everyone. I say: I'm not everyone—plus, what happened to *conversation*? We didn't expect much feedback, but our fight was a most-commented-on post for three days! People had us practically divorced; one even suggested we seek counseling. Most agreed with me, so technically I won, but I won't ever ask people who know nothing about us to butt in to our relationship again. Seeing them make such a big deal over it made me realize that it actually isn't. My husband and I get lots of face time, and that's what really matters to me.



COUPLE #2 J.T. and B.Y., New York City

My husband bought a \$400 guitar even though he can barely play. He figured getting one would force him to learn, which he's always wanted to do. But I thought he should have borrowed one and taken lessons, then invest later if he enjoys it. Boy, did those commenters put me in my place! One said, "What's it got to do with you what your partner buys for himself with his extra money?" I got outvoted 20 to 8. As much as some comments stung, it was actually fun—and helpful—to hear people's perspectives. I realized I need to let go a bit, and it helped us move on. I would definitely do this again, and I even told my friends to try it!



Jessica lost 85 lbs
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The 7 things I'm **not**

Aaron Traister isn't breaking any laws—or vows. But he has secrets, from the petty to the profound, that you (and his wife—hi, Karel!) really ought to know.



Redbook columnist Aaron Traister lives in Philadelphia with his wife and two kids. Read his blog at redbookmag.com/aaron.

My wife and I have an honest, open relationship, mostly because Karel can read me as easily as a Stephenie Meyer novel, so I can't lie to her. But there are a few things I simply don't tell her. I'm not hiding a heroin addiction or a mistress, nothing that could financially ruin us or cause bodily harm—just moments of my life I need sole ownership over. This is what—and why—I don't tell:

1. How much crap I eat when she's not around.

The other afternoon I left the kids with Karel and went to the bar to write. (It's quieter there than at my house—amazing, I know.) This bar is famous for serving a sandwich called the Schmitter, which is made with grilled salami, steak, tomatoes, fried onions, cheese, and “special sauce” on a kaiser bun. It was such a rare treat not to have to put the kids to bed that I cut loose and consumed three in a row. Let me repeat: I had three in three hours (along with three pints of Guinness). When I got home and Karel asked me if I'd eaten, I just said, “Yes,” as I staggered to the couch. Had I been more specific with my semi-vegetarian wife, I would've caught hell. But I'm a generally healthy person, so three Schmitters didn't kill me, and not knowing about them didn't kill Karel. In fact, telling her might have backfired (on Karel, not me), because when people tell me what's in my best interest, I tend to do the exact opposite. After reading *The Omnivore's Dilemma*, I craved McDonald's. The Surgeon General's warning makes me want to smoke. If she'd given me grief about eating three fatty sandwiches, I might have headed right back for a fourth.

2. What's on my fix-it list. I love watching football on the weekends. Unfortunately, Saturday and Sunday

are the most logical days to do home repairs. So if I told Karel everything I know is wrong around the house, I wouldn't watch football for the next three years. I figure she'll notice it all eventually, but my current plan is not to address anything until the off-season, including that leaky ceiling that occurs on the first floor when Karel showers on the second floor.

3. My complete computer history. Self-gratification. All men do it, and now, thanks to the Internet, all men have an endless supply of visual aids. I'm not talking about an Internet porn addiction here—no

“On the outside, I'm cool with making less than my wife, but deep down it drives me nuts.”

one's missing Great Gram's 90th because they can't pry themselves away from *Booty Detectives 4*. I'm just a regular guy who watches a normal amount of the stuff. Most wives don't want to know about this, and that's fine with me. Especially when my, uh, hobby causes technical problems. I see no reason to tell Karel that it was probably a visit to naughtynurses.com that crashed the computer. (So many things could crash a computer—why must we always blame the naughty nurses?) The repair guys at Best Buy will figure it out, and that will be all the embarrassment I need.

4. That I can't deal with being outearned.

Back when Karel was bartending and I was working at after-school programs and doing security at bars, our incomes were pretty even. Then she got a salaried job, and I had an hourly paycheck, which soon dwindled to no paycheck. On the outside, I'm cool about staying home with the kids and making less than my wife, but deep down it drives me nuts. It feels totally emasculating. Contributing an equal or greater amount financially is the main motivation

Need help decoding male behavior? Email your questions to redbook@hearthst.com (subject: Whys Guy). Letters may be edited for clarity and length.

telling my wife

behind my writing career. Someday I'd like to point to my kitchen ceiling and say, "There's no leak up there because I paid someone to repair it—like a real man."

5. About the occasional tingling in my arm.

Unless I can see bone or can't staunch the bleeding, I'm not going to the doctor for anything other than a checkup, so Karel doesn't need to know about my arm tingling, the semi-regular searing pain in my lower back, or the time I nearly passed out at the end of a four-mile run. Sometimes these things keep me awake at night, but they usually go away. Again, I'm a pretty healthy guy (see, I run), but like most middle-aged men, I've become acutely aware of my mortality, and it would be cruel to subject my wife to my existential angst. I also fear that sharing my concerns with Karel would be akin to telling a doctor: Suddenly they'd be real, and there could be something, or several things, really wrong. Ignorance is bliss for everyone involved.

6. The details of my night out with the guys.

I don't go out much. Neither do most guys I know who have kids. So when I do manage to wrangle a group of friends, all bets are off. I'm staying until the bar throws me out, and I'm buying drinks. It's a release—a few hours to pretend I'm a teenager again. Will I regret it when the kids get me up at 5:30 the next morning? Sure. Will I regret it when I realize I blew my half of the weekly budget and I'll be eating buttered noodles for lunch all week? Sure. But it's totally worth it. It's my night out, and as long as Karel isn't eating noodles and I'm pulling my weight as a dad the next day, it's none of her business. And if she gets nosy, I remind her that I can be equally interested in the financial ramifications of her new jewelry-making hobby.

7. That I flirt with other women. For several years after we were married, I wasn't confident enough in my ability to be faithful to even *smile* at

another woman. I didn't go to after-work drinks without Karel, and if she went out of town, I stayed in. But I've relaxed about occasionally bantering with other women. Karel is a beautiful woman, and I imagine she sometimes finds herself in the same situation, which is great, because I firmly believe in the sexiness of a little outside validation. But I don't want her to tell me about the guy she had a drink with on the plane—I just want her to jump me when she gets home.

I guess I believe we both need our own stories or we'd lose interest in each other pretty fast. Having private thoughts, fears, and guilty pleasures keeps me sharp and interesting and makes me feel that I still might be able to surprise Karel one day, and that I might also surprise myself. [®]



Straight answer from the Whys Guy

Dear Whys Guy: My fiancé always points out women on TV he thinks are "hot." It really bothers me. Why does he do this? Why not point out how hot I am? —Jamie, PA

Dear Jamie: Karel is sitting next to me as I read your letter and telling me I have no business answering it,

because I do the exact same thing. At least let me explain why: I feel weird and guilty when I check out other women, especially because I'm so obviously distracted. So I'm totally honest with her about it in the hope that my honesty will score me brownie points—which it doesn't. My advice? Tell your fiancé how much it bothers you. If he's slow on the uptake (like me), force him to watch the *Twilight* movies with you and give him a taste of his own medicine.



HATE psoriasis.
LOVE clearer skin.

Brittany S.
HUMIRA Patient



HATE psoriasis.
LOVE clearer skin.

Brittany S.
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*Eligibility and other restrictions apply to co-pay program.

Important Safety Information¹

What is the most important information I should know about HUMIRA?

- **Serious infections.** HUMIRA can lower your ability to fight infections. **Serious infections have happened in patients taking HUMIRA. These infections include tuberculosis (TB) and infections caused by viruses, fungi, or bacteria that have spread throughout the body. Some patients have died from these infections.** Your doctor should test you for TB before starting HUMIRA, and monitor you closely for signs and symptoms of TB during treatment with HUMIRA.
- **Certain types of Cancer.** There have been cases of unusual cancers in children and teenagers using TNF-blocker medicines. For children and adults taking TNF-blocker medicines, including HUMIRA, the chance of getting lymphoma or other cancers may increase. Some patients have developed non-melanoma skin cancer; tell your doctor if you have a bump or open sore that doesn't heal.

Tell your doctor about all of your health conditions, including if you:

- ✓ Think you have an infection. Don't start HUMIRA if you have any kind of infection.
- ✓ Are being treated for infection, or have signs of an infection, such as fever, cough, or flu-like symptoms
- ✓ Have any open cuts or sores
- ✓ Get a lot of infections or have infections that keep coming back
- ✓ Have diabetes
- ✓ Have TB or have been in close contact with someone with TB, or were born in, lived in, or traveled where there is more risk for getting TB
- ✓ Live or have lived in an area (such as the Ohio and Mississippi River valleys) where there is an increased risk for getting certain kinds of fungal infections, such as histoplasmosis.
- ✓ Have or have had hepatitis B
- ✓ Take other medicines, especially Kineret (anakinra). Some medicines that suppress the immune system may increase your risk of serious infections.
- ✓ Are scheduled for major surgery
- ✓ Have numbness or tingling or a nervous system disease, such as multiple sclerosis or Guillain-Barré syndrome.
- ✓ Have heart failure or other heart conditions
- ✓ Have recently received or are scheduled to receive a vaccine. Patients receiving HUMIRA should not receive live vaccines.
- ✓ Are allergic to rubber, latex, or any ingredients of HUMIRA
- ✓ Are pregnant, planning to become pregnant, or breastfeeding

Call your doctor right away if you have an infection or any sign of an infection while on HUMIRA.

HUMIRA can cause other serious side effects, including:

- Allergic reactions.
- Hepatitis B virus reactivation in patients that carry the virus in their blood.
- Nervous system problems.
- Blood problems.
- New heart failure or worsening of heart failure you already have.
- Immune reactions including a lupus-like syndrome.
- New psoriasis or worsening of psoriasis you already have.

Common side effects of HUMIRA include injection site reactions (redness, rash, swelling, itching, or bruising), upper respiratory infections, headaches, rash, and nausea.

These are not all of the possible side effects with HUMIRA. For more information, talk to your health care provider.

Reference: 1. HUMIRA injection [package insert]. North Chicago, IL; Abbott Laboratories.

Please see additional Patient Information on the following pages.

Talk to your dermatologist about

HUMIRA[®]
adalimumab

**An example of
75% skin clearance.**

For illustrative purposes only.
Your results may vary.



In one clinical trial for moderate to severe chronic plaque psoriasis patients, 7 out of 10 adults taking HUMIRA saw 75% skin clearance and 6 out of 10 patients had clear or almost clear skin at 16 weeks.

HUMIRA® (HU-MARE-AH) (adalimumab)

CONSUMER BRIEF SUMMARY
CONSULT PACKAGE INSERT FOR FULL
PRESCRIBING INFORMATION

Patient Information

Read the Medication Guide that comes with HUMIRA before you start taking it and each time you get a refill. There may be new information. This brief summary does not take the place of talking with your doctor about your medical condition or treatment with HUMIRA.

What is the most important information I should know about HUMIRA?

HUMIRA is a medicine that affects your immune system. HUMIRA can lower the ability of the immune system to fight infections. **Serious infections have happened in patients taking HUMIRA. These infections include tuberculosis (TB) and infections caused by viruses, fungi or bacteria that have spread throughout the body. Some patients have died from these infections.**

- Your doctor should test you for TB before starting HUMIRA.
- Your doctor should monitor you closely for signs and symptoms of TB during treatment with HUMIRA.

Before starting HUMIRA, tell your doctor if you:

- think you have an infection. You should not start taking HUMIRA if you have any kind of infection.
- are being treated for an infection
- have signs of an infection, such as a fever, cough, or flu-like symptoms
- have any open cuts or sores on your body
- get a lot of infections or have infections that keep coming back
- have diabetes
- have TB, or have been in close contact with someone with TB
- were born in, lived in, or traveled to countries where there is more risk for getting TB. Ask your doctor if you are not sure.
- live or have lived in certain parts of the country (such as the Ohio and Mississippi River valleys) where there is an increased risk for getting certain kinds of fungal infections (histoplasmosis, coccidioidomycosis, or blastomycosis). If you do not know if you have lived in an area where histoplasmosis, coccidioidomycosis, or blastomycosis is common, ask your doctor.
- have or have had hepatitis B
- use the medicine Kineret (anakinra). You may have a higher chance for serious infections and a low white blood cell count when taking HUMIRA with Kineret.
- are scheduled to have major surgery

After starting HUMIRA, call your doctor right away if you have an infection, or any sign of an infection, including:

- a fever

- feel very tired
- a cough
- flu-like symptoms
- warm, red, or painful skin
- open cuts or sores on your body

HUMIRA can make you more likely to get infections or make any infection that you may have worse.

Certain types of Cancer.

- There have been cases of unusual cancers in children and teenage patients using TNF-blocking agents.
- For children and adults taking TNF-blocker medicines, including HUMIRA, the chances of getting lymphoma or other cancers may increase.
- Some patients receiving HUMIRA have developed types of cancer called non-melanoma skin cancer (basal cell cancer and squamous cell cancer of the skin), which are generally not life-threatening if treated. Tell your doctor if you have a bump or open sore that doesn't heal.
- Patients with RA, especially more serious RA, may have a higher chance for getting a kind of cancer called lymphoma.

See the section "What are the possible side effects of HUMIRA?" below for more information.

What is HUMIRA?

HUMIRA is a medicine called a Tumor Necrosis Factor (TNF) blocker. HUMIRA is used in adults or children (as indicated) to:

- Reduce the signs and symptoms of:
 - **moderate to severe rheumatoid arthritis (RA)** in adults. HUMIRA can be used alone or with methotrexate or with certain other medicines. HUMIRA may prevent further damage to your bones and joints and may help your ability to perform daily activities.
 - **moderate to severe polyarticular juvenile idiopathic arthritis (JIA)** in children 4 years of age and older. HUMIRA can be used alone or with methotrexate or with certain other medicines.
 - **psoriatic arthritis (PsA)**. HUMIRA can be used alone or with certain other medicines. HUMIRA may prevent further damage to your bones and joints and may help your ability to perform daily activities.
 - **ankylosing spondylitis (AS)**
 - **moderate to severe Crohn's disease (CD)** in adults who have not responded well to other treatments.

- **Treat moderate to severe chronic (lasting a long time) plaque psoriasis (Ps)** in adults who have the condition in many areas of their body and who may benefit from taking injections or pills (systemic therapy) or phototherapy (treatment using ultraviolet light alone or with pills).

People with these diseases have too much of a protein called tumor necrosis factor (TNF) in the affected areas of the body. HUMIRA can block the bad effects of TNF in those affected areas, but it can also lower the ability of the immune system to fight infections. See **"What is the most important information I should know about HUMIRA?"** and **"What are the possible side effects of HUMIRA?"**

What should I tell my doctor before taking HUMIRA?

Before starting HUMIRA, tell your doctor about all of your health conditions, including if you:

- have an infection. See "What is the most important information I should know about HUMIRA?"
- have any numbness or tingling or have a disease that affects your nervous system such as multiple sclerosis or Guillain-Barré syndrome.
- have heart failure or other heart conditions. If you have heart failure, it may get worse while you are taking HUMIRA.
- have recently received or are scheduled to receive a vaccine. Patients receiving HUMIRA should not receive live vaccines. Except for live vaccines, patients may still receive vaccines while on HUMIRA. It is recommended that children with juvenile idiopathic arthritis be brought up to date with all immunizations prior to starting HUMIRA.
- are allergic to rubber or latex. The needle cover on the prefilled syringe contains dry natural rubber. Tell your doctor if you have any allergies to rubber or latex.
- are allergic to HUMIRA or to any of its ingredients. See the end of the Medication Guide for a list of ingredients in HUMIRA.

Tell your doctor if you are pregnant, planning to become pregnant, or breastfeeding. HUMIRA should only be used during a pregnancy if needed. Women who are breastfeeding should talk to their doctor about whether or not to use HUMIRA.

Pregnancy Registry: Abbott Laboratories has a registry for pregnant women who take HUMIRA. The purpose of this registry is to check the health of the pregnant mother and her child. Talk to your doctor if you are pregnant and contact the registry at 1-877-311-8972.

Tell your doctor about all the medicines you take, including prescription and non-prescription medicines, vitamins and herbal supplements. Especially, tell your doctor if you take Kineret (anakinra). You may have a higher chance for serious infections and a low white blood cell count when taking HUMIRA with Kineret. Also, tell your doctor if you are taking other medicines that suppress the immune system.

Know the medicines you take. Keep a list of your medicines with you to show your doctor and pharmacist each time you get a new medicine.

How should I take HUMIRA?

See the section, “**How do I prepare and give an injection of HUMIRA?**” at the end of the Medication Guide that comes with HUMIRA for complete instructions for use.

- HUMIRA is given by an injection under the skin. Your doctor will tell you how often to take an injection of HUMIRA. This is based on your condition to be treated.

Do not inject HUMIRA more often than prescribed.

- Make sure you have been shown how to inject HUMIRA before you do it yourself. You can call your doctor or 1-800-4HUMIRA (448-6472) if you have any questions about giving yourself an injection. Someone you know can also help you with your injection.
- If you take more HUMIRA than you were told to take, call your doctor.
- Do not miss any doses of HUMIRA. If you forget to take HUMIRA, inject a dose as soon as you remember. Then, take your next dose at your regular scheduled time. This will put you back on schedule. To help you remember when to take HUMIRA, you can mark your calendar ahead of time with the stickers provided in the back of the Medication Guide.

What are the possible side effects of HUMIRA?

HUMIRA can cause serious side effects, including:

See “**What is the most important information I should know about HUMIRA?**”

• Serious infections.

Your doctor will examine you for TB and perform a test to see if you have TB. If your doctor feels that you are at risk for TB, you

may be treated with medicine for TB before you begin treatment with HUMIRA and during treatment with HUMIRA. Even if your TB test is negative your doctor should carefully monitor you for TB infections while you are taking HUMIRA. Patients who had a negative TB skin test before receiving HUMIRA have developed active TB. Tell your doctor if you have any of the following symptoms while taking or after taking HUMIRA:

- cough that does not go away
 - low grade fever
 - weight loss
 - loss of body fat and muscle (wasting)
 - **Allergic reactions.** Signs of a serious allergic reaction include a skin rash, a swollen face, or trouble breathing.
 - **Hepatitis B virus reactivation in patients who carry the virus in their blood.** In some cases patients have died as a result of hepatitis B virus being reactivated. Your doctor should monitor you carefully during treatment with HUMIRA if you carry the hepatitis B virus in your blood. Tell your doctor if you have any of the following symptoms:
 - feel unwell
 - poor appetite
 - tiredness (fatigue)
 - fever, skin rash, or joint pain
 - **Nervous system problems.** Signs and symptoms of a nervous system problem include: numbness or tingling, problems with your vision, weakness in your arms or legs, and dizziness.
 - **Blood problems.** Your body may not make enough of the blood cells that help fight infections or help to stop bleeding. Symptoms include a fever that does not go away, bruising or bleeding very easily, or looking very pale.
 - **New heart failure or worsening of heart failure you already have.** Symptoms include shortness of breath or swelling of your ankles or feet or sudden weight gain.
 - **Immune reactions including a lupus-like syndrome.** Symptoms include chest discomfort or pain that does not go away, shortness of breath, joint pain, or a rash on your cheeks or arms that gets worse in the sun. Symptoms may go away when you stop HUMIRA.
 - **Psoriasis.** Some people using HUMIRA had new psoriasis or worsening of psoriasis they already had. Tell your doctor if you develop red scaly patches or raised bumps that are filled with pus. Your doctor may decide to stop your treatment with HUMIRA.
- Call your doctor or get medical care right away if you develop any of the above symptoms. Your treatment with HUMIRA may be stopped.**

Common side effects with HUMIRA include:

- **Injection site reactions** such as redness, rash, swelling, itching, or bruising. These symptoms usually will go away within a few days. If you have pain, redness or swelling around the injection site that doesn't go away within a few days or gets worse, call your doctor right away.
- **Upper respiratory infections** (including sinus infections)
- **Headaches**
- **Rash**
- **Nausea**

These are not all the possible side effects with HUMIRA. Tell your doctor if you have any side effect that bothers you or that does not go away. Ask your doctor or pharmacist for more information.

General information about HUMIRA

Medicines are sometimes prescribed for purposes other than those listed in a Medication Guide. Do not use HUMIRA for a condition for which it was not prescribed. Do not give HUMIRA to other people, even if they have the same condition. It may harm them.

This brief summary summarizes the most important information about HUMIRA. If you would like more information, talk with your doctor. You can ask your doctor or pharmacist for information about HUMIRA that was written for healthcare professionals.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

For more information go to www.HUMIRA.com or you can enroll in a patient support program by calling 1-800-4HUMIRA (448-6472).

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Say "I do-over" with some improved vows

♥ DEAREST WIFE, I PROMISE...



...not to announce on Facebook that you're pregnant before we tell your parents to their actual faces.

...to always be the one who kisses you as everyone blows those annoying

horns and yells, "Happy New Year!"

...that when I ask to take a bite of your burger, there will still be some burger left to hand back to you.

...to stop suggesting that you take a pole-dancing class at your gym, even though I hear it's a really good cardio workout and, uh, weren't you just saying that you need to do more cardio?

♥ DEAREST HUSBAND, I PROMISE...

...not to warm my freezing-cold feet against your nice warm you-know. Not without warning, anyway.

...that I will seriously consider letting you videotape us having sex. There, I've considered it. The answer is no—but I'm happy to give you a few gems for your *mental* highlight reel.

...never to swear off sugar, Diet Coke, and coffee at the same time, ever again.

...not to make you feel guilty about having a life of your own. So long as that life does not include strip clubs, texting naked pics to strangers, or a close friendship with Brett Favre.

TWO WEEKS TO HEALTHIER GUMS.



Help reverse gingivitis in as little as two weeks.

Simply use Oral-B Glide Pro-Health Clinical Protection Floss as part of your complete dental routine.

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Inside the infidelity club

Virginia Heffernan doesn't cheat on her husband, but she can't stop eavesdropping on women who do. The weirdest part: What she's learned has *strengthened* her marriage.

If the Internet were a high school, the message board jokingly named Cleveland would be the spot by the bleachers where the wise-cracking bad girls hang out. I love Cleveland. I can't stay away. Cleveland is controlled by a small band of outlaws whose customs fascinate me: They are all adulterous moms.

My own marriage of seven years is... interesting. My husband and I both like control, and not infrequently we have heated discussions—arguments—okay, *fights*. We regularly resolve to do better, but on whose *terms* will we do better? His! Mine! Round and round, and then we're making up and falling back in love, until before long we're "discussing" again. Over our total 10 years together, this rhythm, which others might find unbearable, has become familiar and even comfortable, mostly because it's ours. And in spite of the storm cycles, there have been no big betrayals—no affairs—or at least, um, none that I know of.

But ever since I stumbled into Cleveland, I've been spying on adultery. In the hours after the kids are asleep and we're both at our laptops, I've stopped wondering whether David is G-chatting with an old girlfriend or looking for trouble on the pro-cheating site Ashley Madison. (That's the one with the chilling tagline "Life is short. Have an affair.") Instead, I study riveting real-time case histories of spousal duplicity. While it's tempting to avoid this unsettling stuff altogether—as if contact with mere *stories* of adultery might poison my domestic well-being—I submerge myself in it.

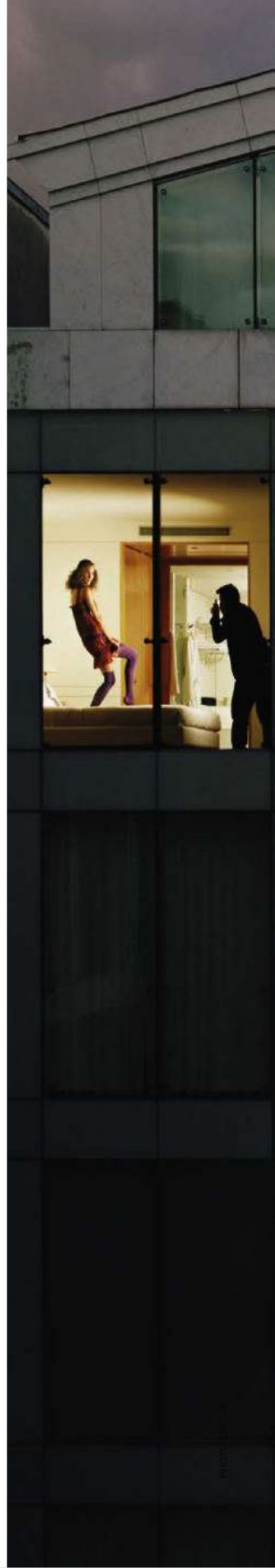
Why? I'm still figuring that out. I know the voices of the adulteresses mesmerize me. Their excitement over their cloak-and-dagger relationships is contagious. And come on, who with the slightest interest in sociology—or romance—can

resist tales of lunchtime trysts in a flatbed truck? The Cleveland regulars—an anonymous, self-quarantined subset of a mainstream mom board called YouBeMom—are proud cheaters. They chat giddily about their affairs. They strategize about deceiving their husbands. They discuss the thrill of sexting, the timing of hookups, and the logistics of hiding the whole thing from their children. The revelations on Cleveland would make Lady Gaga feel flustered. It's not for the faint of heart.

And then there's Surviving Infidelity, another adultery board I compulsively read; that one's for nothing *but* faint hearts. Surviving Infidelity is dominated by women whose husbands have been unfaithful to them. Screen names include Mangled-Heart, Deeply Scared, and Drowninginsorrow. The welcome mat reads: "Please come in and share... you're safe here." And while the forum's moderators describe themselves as "well into recovery, whether divorced or reconciling," open wounds are everywhere. The site's icon is a heart with a Band-Aid on it. This is a place for pain.

If, as the ladies of *Sex and the City* said, the wedding section of the newspaper is like sports pages for women, maybe adultery forums are like female fantasy football. In following their twists and turns, I don't so much fantasize about being a player in an affair; instead, I imagine myself as a general manager—a love-triangle mastermind who might understand all the plays, foresee the challenges, and somehow ensure victory for the good guys.

But of course, *everyone* who posts on these boards sees herself as the good guy, the heroine of her own story. The stalwart wives automatically win my compassion; their suffering blows my heart open. Because I'm also someone's wife, I almost feel contractually obligated to root for them. Yet there's something





Within an hour, all
of these people will
be writing about
their exploits online.

“As much as this year has been emotional and upsetting
“I do not regret my affair at all.” What I regret is that I

irresistible about the adulteresses too. Anna Karenina, Erica Kane—there’s a reason these passionate, complex, head-case women fascinate so many of us, including me.

Betrayal: our longest-running soap opera

A non-adulterous mom recently visited Cleveland, posting, “I just don’t believe you guys deserve a judgment-free zone.” A Clevelander shot back: “God, is that you?” These women are brazen and drily funny. At the same time, they can lapse into clichés, droning on about their secret boyfriends as if they were the first women to fall in love, while barely mentioning their husbands and families (oh, *them?*). A typical post sounds practically delirious: “Time with him is amazing. Feels like we are the only two people in the world.” But the inevitable lows are just as dramatic, and equally *Twilight*: “Affair makes me feel like I am dying a slow death when contact is so far in between.”

Having gotten the adultery fix, the Cleveland crowd are quick to defend it, even when they know how much they’re hurting the people around them. One poster put it bluntly: “As much as this past year has been emotional and upsetting and I am blowing up my family, I do not regret my affair at all. What I regret is that I lived for so long without this type of love.”

That logic brings flooding back those feelings of fierce selfishness I remember from adolescence, when I felt entitled to Hollywood-style romance, starring me—*all the time*. At some point, most of us stop being teenage egomaniacs; we stop putting our desire for excitement above all else. But Cleveland women don’t. And watching how they struggle to integrate their selfishness with their real-life responsibilities has helped me see that maybe *this* is the major challenge of adulthood: learning how to balance your private impulses against the family good—the life (and, when you have kids, those *lives*) you’ve created, in good faith, with the person you married.

Recently one poster wondered how others hide the heartbreak of an affair’s end from their husbands. A fellow cheater replied: “I’m withdrawn and introverted. Try not to be too morose around him and kids.” What? This post made me sick. You’re betraying your family, your boyfriend leaves you, and your resolution is—to try not to be *too morose*? Well, that’s big of you, lady!

There’s none of that callousness on *Surviving Infidelity*, where people in a haze of suffering try to make sense of it. To this end, posters have devised a dictionary of acronyms that supply a tidy, almost glib guide to extremely messy human relationships. Here, you quickly learn that the OW (other woman) is the scourge of the BW (betrayed wife) with whose WH (wayward husband)

she may have had a PA (physical affair) or an EA (emotional affair) or even an OEA (online emotional affair).

Members flaunt the acronyms as if they’re badges to sew on a Girl Scout uniform, and the overall tone of their posts can turn at once acid and childish. *I hate everything about the lying scumbag. But do you think he’ll come back if I lose weight?* Yet board veterans frequently come up with unforgettable bits of wisdom. I loved one woman’s evocation of “the fog” that adulterers must come out of if a couple is to reconcile. Even her bitter name-calling seemed healthy. “My husband thought he loved Gutter Skank and me both during the time he was fogged,” she says. “Now, he cannot believe he was involved with anyone else, let alone a serial cheater who gives sleaze a bad name. The fog is a powerful thing.”

And then there’s Ann124, whose D-Day (discovery day) was July 4, 2010, when she found out that her husband of 22 years was involved with someone he worked with on the factory night shift: She drove to the factory to bring her husband a 2 a.m. meal and spotted him canoodling with a coworker in his parked car. Ann124 is pretty amazing. Ever since she witnessed what she did in the parking lot, she is on a mission to discover what really went wrong in her relationship—without hurting her grown son, who works at the same factory. Her sleuthing is straight out of *CSI*: phone records, pilfered gym logbooks, even an episode with a lint roller in the backseat of her husband’s car. Yet despite her unhappiness, she also seems to treat the infidelity as an opportunity to confront her own ambivalence about her marriage, find a way to forgive her husband, and keep her family intact. “The hurt just gets worse,” she writes, but, “I wonder if [it’s] more from my trying to figure life out than the hurt of his betrayal.... I’m not sure about anything anymore. Our whole lives together have been one big happy half truth.”

One poster wrote not long ago that her husband claimed his affair was just an EA—nothing physical. The others jumped on this as naive, and one told her that the affair was probably a full-on PA. This was the logic: On D-Day, philandering husbands minimize their transgressions, or—in the board’s jargon—“they ALWAYS affair down. ALWAYS.” Husbands, in other words, say the affairs are not physical, or, if they admit to physical, they say they’re not long-term, or, if they admit to long-term, they say they’re not driven by love. This insight came from Selkiescot, who has been on *Surviving Infidelity* since April 2009. She lists the D-Days in her life as “TOO MANY.”

Naturally, the *Surviving Infidelity* women have an acronym for this kind of slow-motion confession: TTT, for “trickle-truth.” Trickle-truthing means revealing facts in tiny doses, hedging every admission, divulging only as much as absolutely necessary per confrontation. It has the effect

and **I am blowing up my family**," a cheater writes, lived for so long without this type of love."

of making the person being TT'ed feel slightly insane. It strikes me as the cruelest part of infidelity, because it projects the adulterer's emotional problems onto his or her spouse. (*You don't trust me? You're being neurotic! You're always so suspicious!*) Remember Bill Clinton's revealing gradually and only under duress that, yes, he had cheated—several times? The lies and sub-lies, the agonizingly slow revelations, drove everyone watching the news nuts. God only knows how Hillary felt.

The case for honesty, 24/7

After reading so much about the pain caused by trickle-truthing, I found myself resolving not to do it to my husband. I have no affair to confess, but I'm trying to tell him, without stalling, the things I might have postponed or distorted in the past: that I've overspent, that the dinner I "have" to attend is a social event and not a "work thing," that I'm the one who forgot about our son's allergy to penicillin, not the nurse. This seemingly small resolution—to be direct, even when what I'm admitting is incriminating—has had actual consequences for our marriage. David second-guesses me less, and I don't feel as scrutinized. We have fewer fights.

It's about time I learned that withholding the truth, or meting it out reluctantly, is bad for marriage. What shocks me is that I learned it on these boards. I sought them out because I thought they'd be filled with scandal, not with advice about being a better wife. But the boards have proven to be much more morally serious than I expected. On a subforum of *Surviving Infidelity* for the cheaters themselves, called *Wayward Side*, a man recently posted: "I hate the fact that my wife lost so much of herself as a result of my stupidity and lack of moral compass. I hate that the night I kissed OW I made a conscious choice [to] cause this, that this wasn't an accident. I hate that my children will not see a great example of marriage and may be another statistic of a broken-up home."

This lament seems like the boards' last word on infidelity, so clear-eyed, so heavy with regrets. It hits right at the heart of it, revealing the domestic tragedy at the center of each of these stories. The *Clevelanders*, chasing the rush of true love they believe life owes them, strand their families in confusion and grief. The wives of *Surviving Infidelity*, brought to an emotional halt by anger and pain, fight to move on. Adultery is soap-operatic, but it happens in every circle of friends, generation after married generation. And it never seems to get easier.

So I read these boards as others might watch the *Real Housewives* or gobble Jennifer Weiner novels. The characters never fail to intrigue me. And seeing these hearts laid bare brings to mind bittersweet memories of my teens and 20s, when I too was vulnerable to being swept off my feet. I like to remember that vulnerability, now, from the safe distance of family life. At the same time, the boards also remind me how fragile even my safety is, and how quickly things can change. They remind me that passion can explode lives. **R**

Virginia Heffernan writes "The Medium" column for The New York Times Magazine. Her book, The Pleasures of the Internet, is forthcoming from Free Press. She lives in Brooklyn, NY, with her husband and two children.



WH meets OW:
easy acronyms for a
domestic tragedy.



Still trying to get ahead of your depression?

If you've been on an antidepressant for at least
six weeks, you may need something more.

For more help getting ahead of your cloud of depression, ask your doctor about adding SEROQUEL XR.

SEROQUEL XR is approved to treat major depressive disorder when added to an antidepressant. For many, taking SEROQUEL XR with an antidepressant was proven more effective for treating unresolved symptoms of depression than an antidepressant alone.

Important Safety Information About SEROQUEL XR

Elderly patients with dementia-related psychosis (having lost touch with reality due to confusion and memory loss) treated with this type of medicine are at an increased risk of death, compared to placebo (sugar pill). SEROQUEL XR is not approved for treating these patients.

Antidepressants have increased the risk of suicidal thoughts and actions in some children, teenagers, and young adults. Patients of all ages starting treatment should be watched closely for worsening of depression, suicidal thoughts or actions, unusual changes in behavior, agitation, and irritability. Patients, families, and caregivers should pay close attention to any changes, especially sudden changes in mood, behaviors, thoughts, or feelings. This is very important when an antidepressant medicine is started or when the dose is changed. Report any change in these symptoms immediately to the doctor. SEROQUEL XR is not approved for patients under the age of 18 years.

- Stop SEROQUEL XR and call your doctor right away if you have some or all of the following symptoms: high fever; stiff muscles; confusion; sweating; changes in pulse, heart rate, and blood pressure. These may be symptoms of neuroleptic malignant syndrome (NMS), a rare and serious condition that can lead to death
- High blood sugar and diabetes have been reported with SEROQUEL XR and medicines like it. If you have diabetes or risk factors such as obesity or a family history of diabetes, your doctor should check your blood sugar before you start taking SEROQUEL XR and also during therapy. If you develop symptoms of high blood sugar or diabetes, such as excessive thirst or hunger, increased urination, or weakness, contact your doctor. Complications from diabetes can be serious and even life threatening
- Increases in triglycerides and in LDL (bad) cholesterol and decreases in HDL (good) cholesterol have been reported with SEROQUEL XR. Your doctor should check your cholesterol levels before you start SEROQUEL XR and during therapy
- Weight gain has been reported with SEROQUEL XR. Your doctor should check your weight regularly
- Tell your doctor about any movements you cannot control in your face, tongue, or other body parts, as they may be signs of a serious condition called tardive dyskinesia (TD). TD may not go away, even if you stop taking SEROQUEL XR. TD may also start after you stop taking SEROQUEL XR
- Other risks include feeling dizzy or lightheaded upon standing, decreases in white blood cells (which can be fatal), or trouble swallowing. Tell your doctor if you experience any of these

- Before starting treatment, tell your doctor about all prescription and nonprescription medicines you are taking. Also tell your doctor if you have or have had low white blood cell count, seizures, abnormal thyroid tests, high prolactin levels, heart or liver problems, or cataracts. An eye exam for cataracts is recommended at the beginning of treatment and every 6 months thereafter
- Since drowsiness has been reported with SEROQUEL XR, you should not participate in activities such as driving or operating machinery until you know that you can do so safely. Avoid becoming overheated or dehydrated while taking SEROQUEL XR. Do not drink alcohol while taking SEROQUEL XR
- Tell your doctor if you are pregnant or intend to become pregnant. Avoid breast-feeding while taking SEROQUEL XR
- The most common side effects are drowsiness, dry mouth, constipation, dizziness, increased appetite, upset stomach, weight gain, fatigue, disturbance in speech and language, and stuffy nose
- Do not stop taking SEROQUEL XR without talking to your doctor. Stopping SEROQUEL XR suddenly may cause side effects

This is not a complete summary of safety information. Please discuss the full Prescribing Information with your health care provider.

Indications

SEROQUEL XR is a once-daily tablet approved in adults for add-on treatment to an antidepressant for patients with major depressive disorder (MDD) who did not have an adequate response to antidepressant therapy.

Please see Brief Summary for prescription SEROQUEL XR, including Boxed Warnings, on adjacent pages.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

For questions to ask your doctor, visit SeroquelXR.com or call 1-866-331-3010.

If you're without prescription coverage and can't afford your medication, AstraZeneca may be able to help. For more information, please visit AstraZeneca-us.com.

Learn more at SeroquelXR.com

Once-daily
SEROQUEL XR[®]
quetiapine fumarate
extended-release tablets

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AstraZeneca 

IMPORTANT INFORMATION ABOUT SEROQUEL XR (SER-oh-kwell)

Please read this summary carefully before you start taking SEROQUEL XR and each time you get a refill. There may be new information.

No advertisement can provide all the information needed to determine if a drug is right for you or take the place of careful discussions with your health care provider. Only your health care provider has the training to weigh the risks and benefits of a prescription drug.

What is the most important information I should know about SEROQUEL XR?

Serious side effects may happen when you take SEROQUEL XR, including:

- **Risk of death in the elderly with dementia:** Medicines like SEROQUEL XR can raise the risk of death in elderly people who have lost touch with reality due to confusion and memory loss (dementia). SEROQUEL XR is not approved for treating psychosis in the elderly with dementia.
- **Risk of suicidal thoughts or actions:** Antidepressant medicines, depression and other serious mental illnesses, and suicidal thoughts or actions:
 1. Antidepressant medicines may increase suicidal thoughts or actions in some children, teenagers, and young adults within the first few months of treatment.
 2. Depression and other serious mental illnesses are the most important causes of suicidal thoughts and actions. Some people may have a particularly high risk of having suicidal thoughts or actions. These include people who have (or have a family history of) depression, bipolar illness (also called manic-depressive illness), or suicidal thoughts or actions.
 3. How can I watch for and try to prevent suicidal thoughts and actions in myself or a family member?
 - Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts, or feelings. This is very important when an antidepressant medicine is started or when the dose is changed.
 - Call the health care provider right away to report new or sudden changes in mood, behaviors, thoughts, or feelings.
 - Keep all follow-up visits with the health care provider as scheduled. Call the health care provider between visits as needed, especially if you have concerns about symptoms.

Call a health care provider right away if you or your family member has any of the following symptoms, especially if they are new, worse, or worry you:

- thoughts about suicide or dying
- attempts to commit suicide
- new or worse depression
- new or worse anxiety
- feeling very agitated or restless

- panic attacks
- trouble sleeping (insomnia)
- new or worse irritability
- acting aggressive, being angry, or violent
- acting on dangerous impulses
- an extreme increase in activity and talking (mania)
- other unusual changes in behavior or mood

What else do I need to know about antidepressant medicines?

- **Never stop an antidepressant medicine without first talking to your health care provider.** Stopping an antidepressant medicine suddenly can cause other symptoms.
- **Antidepressants are medicines used to treat depression and other illnesses.** It is important to discuss all the risks of treating depression and also the risks of not treating it. Patients and their families or other caregivers should discuss all treatment choices with the health care provider, not just the use of antidepressants.
- **Antidepressant medicines have other side effects.** Talk to the health care provider about the side effects of the medicine prescribed for you or your family member.
- **Antidepressant medicines can interact with other medicines.** Know all of the medicines that you or your family member take. Keep a list of all medicines to show the health care provider. Do not start new medicines without first checking with your health care provider.
- **Not all antidepressant medicines prescribed for children are FDA approved for use in children.** Talk to your child's health care provider for more information.

What is SEROQUEL XR?

SEROQUEL XR is a prescription medicine used to treat major depressive disorder as add-on treatment with antidepressant medicines when your doctor determines that one antidepressant alone is not enough to treat your depression.

SEROQUEL XR is not approved for patients under 18 years of age.

What are the symptoms of major depressive disorder (MDD)?

- Feeling of sadness, emptiness, and increased tearfulness
- Loss of interest in activities that you once enjoyed and loss of energy
- Problems focusing and making decisions
- Feeling of worthlessness or guilt
- Changes in sleep or eating patterns
- Thoughts of death or suicide
- MDD symptoms last most of the day, nearly every day for at least two weeks, and interfere with daily life at home and at work

What should I tell my health care provider before taking SEROQUEL XR?

Before taking SEROQUEL XR, tell your health care provider if you have or have had

- diabetes or high blood sugar in you or your family: your health care provider should check your blood sugar before you start SEROQUEL XR and also during therapy
- high levels of total cholesterol, triglycerides or LDL-cholesterol or low levels of HDL-cholesterol
- low or high blood pressure
- low white blood cell count
- cataracts
- seizures
- abnormal thyroid tests
- high prolactin levels
- heart problems
- liver problems
- any other medical condition
- pregnancy or plans to become pregnant. It is not known if SEROQUEL XR will harm your unborn baby
- breast-feeding or plans to breast-feed. It is not known if SEROQUEL XR will pass into your breast milk. You and your health care provider should decide if you will take SEROQUEL XR or breast-feed. You should not do both

Tell the health care provider about all the medicines that you take or recently have taken including prescription medicines, nonprescription medicines, herbal supplements and vitamins.

SEROQUEL XR and other medicines may affect each other causing serious side effects. SEROQUEL XR may affect the way other medicines work, and other medicines may affect how SEROQUEL XR works. Especially tell your health care provider if you take or plan to take medicines for:

- depression
- Parkinson's disease
- high blood pressure
- trouble sleeping

Also tell your health care provider if you take or plan to take any of these medicines:

- phenytoin, divalproex or carbamazepine (for epilepsy)
- barbiturates (to help you sleep)
- rifampin (for tuberculosis)
- glucocorticoids (steroids for inflammation)
- thioridazine (an antipsychotic)
- ketoconazole, fluconazole or itraconazole (for fungal infections)
- erythromycin (an antibiotic)
- protease inhibitors (for HIV)

This is not a complete list of medicines that can affect or be affected by SEROQUEL XR. Your doctor can tell you if it is safe to take SEROQUEL XR with your other medicines. Do not start or stop any medicines while taking SEROQUEL XR without talking to your health care provider first. Know the medicines you take. Keep a list of your medicines to show your health care provider and pharmacist when you get a new medicine.

Tell your health care provider if you are having a urine drug screen because SEROQUEL XR may affect your test results. Tell those giving the test that you are taking SEROQUEL XR.

For more information about SEROQUEL XR, visit www.SEROQUELXR.com or call 1-800-236-9933.

SEROQUEL XR®
quetiapine fumarate
extended-release tablets
50, 150, 200, 300 & 400 mg

AstraZeneca

How should I take SEROQUEL XR?

- Take SEROQUEL XR exactly as your health care provider tells you to take it. Do not change the dose yourself.
- Take SEROQUEL XR by mouth, with a light meal or without food.
- SEROQUEL XR should be swallowed whole and not split, chewed or crushed.
- If you feel you need to stop SEROQUEL XR, talk with your health care provider first.

If you suddenly stop taking SEROQUEL XR, you may experience side effects such as trouble sleeping or trouble staying asleep (insomnia), nausea, and vomiting.

- If you miss a dose, take it as soon as you remember. If it is close to the next dose, skip the missed dose. Just take the next dose at your regular time. Do not take 2 doses at the same time unless your health care provider tells you to. If you are not sure about your dosing, call your health care provider.
- If you take too much SEROQUEL XR, call your health care provider or poison control center at 1-800-222-1222 right away or go to the nearest hospital emergency room.

What should I avoid while taking SEROQUEL XR?

Do not drive, operate machinery, or do other dangerous activities until you know how SEROQUEL XR affects you. SEROQUEL XR may make you drowsy.

- Avoid getting overheated or dehydrated.
 - Do not over-exercise.
 - In hot weather, stay inside in a cool place if possible.
 - Stay out of the sun. Do not wear too much or heavy clothing.
 - Drink plenty of water.
- Do not drink alcohol while taking SEROQUEL XR. It may make some side effects of SEROQUEL XR worse.

What are possible side effects of SEROQUEL XR?

Also see "What is the most important information I should know about SEROQUEL XR?" at the beginning of this document.

Serious side effects have been reported with SEROQUEL XR including:

- **Neuroleptic malignant syndrome (NMS):** Tell your health care provider right away if you have some or all of the following symptoms: high fever, stiff muscles, confusion, sweating, changes in pulse, heart rate, and blood pressure. These may be symptoms of a rare and serious condition that can lead to death. Stop SEROQUEL XR and call your health care provider right away

- **High blood sugar (hyperglycemia):** Increases in blood sugar can happen in some people who take SEROQUEL XR. Extremely high blood sugar can lead to coma or death. If you have diabetes or risk factors for diabetes (such as being overweight or a family history of diabetes) your health care provider should check your blood sugar before you start SEROQUEL XR and during therapy. Call your health care provider if you have any of these symptoms of high blood sugar while taking SEROQUEL XR
 - feel very thirsty
 - need to urinate more than usual
 - feel very hungry
 - feel weak or tired
 - feel sick to your stomach
 - feel confused, or your breath smells fruity
- **High cholesterol and triglyceride levels in the blood (fat in the blood):** Increases in total cholesterol, triglycerides and LDL (bad) cholesterol and decreases in HDL (good) cholesterol have been reported in clinical trials with SEROQUEL XR. You may not have any symptoms, so your health care provider should do blood tests to check your cholesterol and triglyceride levels before you start taking SEROQUEL XR and during therapy
- **Increase in weight (weight gain):** Weight gain has been seen in patients who take SEROQUEL XR so you and your health care provider should check your weight regularly
- **Tardive dyskinesia:** Tell your health care provider about any movements you cannot control in your face, tongue, or other body parts. These may be signs of a serious condition. Tardive dyskinesia may not go away, even if you stop taking SEROQUEL XR. Tardive dyskinesia may also start after you stop taking SEROQUEL XR
- **Orthostatic hypotension (decreased blood pressure):** lightheadedness or fainting caused by a sudden change in heart rate and blood pressure when rising too quickly from a sitting or lying position
- **Increases in blood pressure:** reported in children and teenagers. Your health care provider should check blood pressure in children and adolescents before starting SEROQUEL XR and during therapy. SEROQUEL XR is not approved for patients under 18 years of age
- **Low white blood cell count**
- **Cataracts**
- **Seizures**
- **Abnormal thyroid tests:** Your health care provider may do blood tests to check your thyroid hormone level
- **Increases in prolactin levels:** Your health care provider may do blood tests to check your prolactin levels
- **Increases in liver enzymes:** Your health care provider may do blood tests to check your liver enzyme levels
- **Long lasting and painful erection**
- **Difficulty swallowing**

Common possible side effects with SEROQUEL XR include:

- drowsiness
- dry mouth
- constipation
- dizziness
- increased appetite
- upset stomach
- weight gain
- fatigue
- disturbance in speech and language
- stuffy nose

These are not all the possible side effects of SEROQUEL XR. For more information, ask your health care provider or pharmacist.

Call your health care provider for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

How should I store SEROQUEL XR?

- Store SEROQUEL XR at room temperature, between 59°F to 86°F (15°C to 30°C)
- Keep SEROQUEL XR and all medicines out of the reach of children

What are the ingredients in SEROQUEL XR?

Active ingredient: quetiapine fumarate

Inactive ingredients: lactose monohydrate, microcrystalline cellulose, sodium citrate, hypromellose, and magnesium stearate. The film coating for all SEROQUEL XR tablets contain hypromellose, polyethylene glycol 400 and titanium dioxide. In addition, yellow iron oxide (50, 200 and 300 mg tablets) and red iron oxide (50 mg tablets) are included in the film coating of specific strengths.

General information about SEROQUEL XR

Do not take SEROQUEL XR unless your health care provider has prescribed it for you for your condition. Do not share SEROQUEL XR with other people, even if they have the same condition. It may harm them.

NOTE: This summary provides important information about SEROQUEL XR. For more information about SEROQUEL XR, talk with your health care provider or pharmacist or call 1-800-236-9933. You can ask your health care provider for full Prescribing Information about SEROQUEL XR that is written for health care providers and discuss it with him or her.

SEROQUEL XR is a registered trademark of the AstraZeneca group of companies.
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Someone in your life behaving badly? It's Karen Karbo to the rescue!



Advice guru Karen Karbo is a mom, a teacher, and the author of *The Gospel According to Coco Chanel*.

My mom wants me to give up my baby

My fiancé and I just found out that I'm pregnant. Our relationship has been tumultuous—we've broken up three times—but we're excited. My mom says I won't be happy and asked me to consider giving the baby up for adoption! How do I get her to back off and be supportive? —J.B., 32, PITTSBURGH

First, tell your mother in no uncertain terms that you're going to live your life the way you see fit. But know that getting her to accept (not endorse) your decision is probably the best you can hope for at this point. Why? Given your track record with this guy, she thinks she knows what's down the line, and it ain't pretty. She's trying to spare you pain, but the fact is, you are 32—not 6, 20, or even 24. Regardless, I encourage you to put her opinion aside for a moment and ask yourself: If you weren't pregnant, would you be marrying this guy? Unexpected pregnancy doesn't automatically lead to happily-ever-after, and you need time to make sure he's the one you want to be with for the long haul. I suggest that you get some couples counseling before the baby comes—and especially before tying the knot. It's not cheap, but it will be well worth the expense if it helps you form the basis of a strong and healthy family.

Is it too late to apologize?

The other day, I got very short-tempered at Starbucks and barked something mean at the barista. I feel terrible about being *that* customer. Is it weird to go back and apologize days later? What do I say? —A.D., 27, BROOKLYN, NY

Lucky you: You get to make the world a better place! Go back. Go back now. Tell the barista you were having a bad day and that you feel terrible for inflicting it on her. She may indeed think you're weird, but it'll be in a good way.

They're so pushy!

My son's paternal grandparents want a big, showy event for his bar mitzvah; I want something more low-key and elegant. I'd like to keep everyone happy, but this is, after all, my child. How can I navigate this land mine? —L.D., 39, NEW YORK CITY

Make them feel special by giving them a small but essential role in the festivities. Hey, somebody's got to order the invitations. Maybe they'll even pay for 'em!

Need advice?

Send your questions about friends, family, men, and anyone else in your life to karenkarbo@redbookmag.com. Letters may be edited for clarity and length.

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Celebrate the *inchstones*

When you're raising kids, time can speed way up... **and slow way down.** For novelist Nicole Krauss, that's when the magic happens.

Last night I was reading *Alice's Adventures in Wonderland* to my 4-year-old, and as Alice fell and fell down the rabbit hole lined with cupboards—slowly enough that she could remove a jar of marmalade from one shelf and, finding it empty, return it lower down to another—I tried to think just what it was that her predicament reminded me of. Poor Alice shrank, and then just as suddenly she grew, and I realized that what it all made me think of was becoming a parent. Not only because one's life, which once seemed so normal, becomes, overnight, absurd. But because the very medium of experience—time—is so dramatically altered the moment one begins to raise a child.

Once upon a time an hour was 60 minutes long; the scale was fixed and predictable. But now, rising exhausted at 5 a.m. for one child (who immediately shouts for milk and wakes the other, who himself begins to wail and can only be calmed by a game that, played once, will be demanded again and again in a cycle that, in my sleepless state, conjures infinity), the distance to 9 a.m., when the babysitter arrives, is vast and extends a period that in my former life could only have been measured in days.

Just as for Alice, all the old proportions have changed for me. It isn't only that sinkholes have suddenly opened between dawn and breakfast. It's also that in that slowness I've noticed, as I never did before, just what happens between 5 and 9, between November and December—one boy grows an inch, the other learns to draw an elephant. One boy says his own name for the first time, the other inflates seven balloons, clips them to his underwear, and tries to fly.

Yesterday my younger son turned 1½. How could so much endless effort, so much surprise, all fit into the interval between car tune-ups? People are always telling me that my children are going to grow up in a flash, before I know it. But I don't feel that their growth—and perhaps, because of them, even my own growth—is happening without my knowing it. Just the opposite. Ask me what changed in my life this week and I can tell you: One boy needed bigger shoes and learned to open the door, and the other wrote his first poem and started reading Alice. **R**

Nicole Krauss is the author of Great House, The History of Love, and Man Walks Into a Room. Her work has been translated into 35 languages. She lives with her husband and two sons in Brooklyn, NY.



PHOTOGRAPHY BY ELIZABETH TRAYNOR.



7 ODORS SURRENDER TO FEBREZE FRESHNESS



it's a breath of fresh air

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Leah Remini, interviewed by her daughter Sofia, 6



Sofia: What's your favorite room in our house?

Leah: I love your room, because it's so pretty and cozy, and every time someone comes to visit us they want to take a nap in there. But you don't really sleep there much, do you?

Sofia: I like to sleep with you and Daddy sometimes. But sometimes I kick Daddy out of bed by accident and he ends up sleeping on the couch. He loves to sleep on the couch! What movie did you like when you were a kid?

Leah: I really liked *Saturday Night Fever*, which wasn't really a kid's movie, now that I think about it.

Sofia: Was it scary and one of those movies with no color?

Leah: [Laughing] It was a little scary, but it was in color. Your mom's not that old!

Sofia: My favorite movies are *Prince of Persia*, *Chronicles of Narnia*, and I looove *Karate Kid* because Jaden [Smith] is my friend.

Leah: You have a crush on Jake Gyllenhaal, I know. Who else do you have a crush on?

Sofia: Orlando Bloom! How did you and Daddy meet?

Leah: I met your daddy in a nightclub called El Floridita in Hollywood.

Sofia: Daddy lied then.

Leah: Why? What did he say?

Sofia: He said he met you in a Puerto Rican restaurant.

Leah: Actually, it was a Cuban club and restaurant, but I'll let it slide. For me, it was love at first sight.

Sofia: What is your most favorite thing to talk about?

Leah: You! —ADAPTED BY LORI BERGER



Leah Remini
keeps the
conversation
going on CBS's
The Talk.

An important vaccination schedule update for children 15 months to 5 years of age.

Certain strains of the pneumococcal bacteria can cause serious, invasive disease that is being seen more frequently today.



Invasive pneumococcal disease includes bacterial meningitis, which remains a serious risk for children up to age 5. Pneumococcal meningitis can cause death and long-term problems, such as hearing loss.



The doctors at the Centers for Disease Control have recommended that children under 5 who have had a full series of vaccinations with pneumococcal conjugate vaccine should now get a dose of Prevnar 13™, to cover six more strains including the most common one threatening young children today.*



*The immune response from this catch-up schedule might be lower for the 6 additional strains (types 1, 3, 5, 6A, 7F, and 19A) than if your child had received the full 4 doses of Prevnar 13™. It's not known how medically important this difference is.

INDICATION FOR PREVNAR 13™

- Prevnar 13™ is a vaccine approved for use in children 6 weeks through 5 years of age (prior to the 6th birthday).
- Prevnar 13™ is indicated for active immunization for the prevention of invasive disease caused by 13 strains of *Streptococcus pneumoniae* (1, 3, 4, 5, 6A, 6B, 7F, 9V, 14, 18C, 19A, 19F, and 23F).

IMPORTANT SAFETY INFORMATION FOR PREVNAR 13™

- Prevnar 13™ should not be given to anyone with a severe allergic reaction to any component of Prevnar 13™, Prevnar® (Pneumococcal 7-valent Conjugate Vaccine [Diphtheria CRM₁₉₇ Protein]), or any diphtheria toxoid-containing vaccine.
- Prevnar 13™ may not protect all individuals receiving the vaccine. Children with weakened immune systems may have a reduced immune response to Prevnar 13™. A temporary pause of breathing following vaccination has been observed in some infants born prematurely.
- The most commonly reported serious adverse events include bronchiolitis (an infection of the lungs) (0.9%, 1.1%), gastroenteritis (inflammation of the stomach and small intestine) (0.9%, 0.9%), and pneumonia (0.9%, 0.5%) for Prevnar 13™ and Prevnar®, respectively.
- The most common side effects are redness, swelling and tenderness at the injection site, fever, decreased appetite, irritability, increased sleep, and decreased sleep. Any side effects associated with the vaccination should be reported to your child's health care provider.
- Ask your child's health care provider about the risks and benefits of Prevnar 13™. Only a health care provider can decide if Prevnar 13™ is right for your child.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088. Please see Brief Summary of Prescribing Information on reverse side.



FOR MORE INFORMATION, ASK YOUR CHILD'S DOCTOR OR GO TO WWW.PREVNAR13.COM/UPDATE

IMPORTANT FACTS



Prev • nar 13

ABOUT PREVNAR 13™

- Prevnar 13™ is a vaccine which helps protect against 13 strains of *Streptococcus pneumoniae* (1, 3, 4, 5, 6A, 6B, 7F, 9V, 14, 18C, 19A, 19F, and 23F) that can cause invasive disease.
- Prevnar 13™ may also be used for the prevention of otitis media (ear infection) caused by *Streptococcus pneumoniae* strains 4, 6B, 9V, 14, 18C, 19F, and 23F. No efficacy data for ear infections are available for strains 1, 3, 5, 6A, 7F, and 19A.
- Prevnar 13™ may not protect all individuals receiving the vaccine. Protection against ear infections is expected to be less than that for invasive disease.
- Prevnar 13™ does not replace the use of 23-valent pneumococcal polysaccharide vaccine (PPV23) in children ≥24 months of age with sickle cell disease, damaged spleen, HIV infection, chronic illness or who have weakened immune systems.

BEFORE STARTING PREVNAR 13™

Tell your child's health care provider about all of your child's medical conditions, including:

- Previous allergic or adverse reactions to other vaccines.
- Certain conditions that weaken your child's immune system such as a damaged spleen, HIV infection, cancer, or kidney problems. Children with weakened immune systems may have a reduced immune response to Prevnar 13™.

Tell your child's health care provider about all the medicines your child takes, including prescription and over-the-counter medicines, vitamins and herbal supplements.

Especially tell your child's health care provider if your child is taking medicines that can weaken his or her immune system such as steroids (e.g., prednisone) and cancer medicines or if your child is undergoing radiation therapy.

WHO SHOULD RECEIVE PREVNAR 13™?

- Prevnar 13™ is recommended for children 6 weeks through 5 years of age.
- Prevnar 13™ is regularly given as a 4-dose series at 2, 4, 6, and 12 to 15 months of age.
- **Transition schedule:** Children who have received one or more doses of Prevnar® (Pneumococcal 7-valent Conjugate Vaccine [Diphtheria CRM₁₉₇ Protein]) may complete the 4-dose immunization series with Prevnar 13™.
- **Catch-up Schedule:** Children 15 months through 5 years of age who have received 4 doses of Prevnar® may receive one dose of Prevnar 13™ to elicit immune responses to the six additional strains.
- The immune response from the transition or catch-up schedules might be lower for the 6 additional strains (types 1, 3, 5, 6A, 7F, and 19A) than if your child had received the full 4 doses of Prevnar 13™. It's not known how medically important this difference is.

WHO SHOULD NOT RECEIVE PREVNAR 13™?

- Children under 6 weeks of age and over 6 years of age.
- Children who have had a serious allergic reaction to any component of Prevnar 13™, Prevnar®, or any diphtheria toxoid-containing vaccine.

POSSIBLE SIDE EFFECTS OF PREVNAR 13™

Prevnar 13™ may cause serious side effects including:

- Temporary pause of breathing in some infants born prematurely
- Bronchiolitis (an infection of the lungs)
- Gastroenteritis (inflammation of the stomach and small intestine)
- Pneumonia

The most common side effects of Prevnar 13™ are:

- Redness, swelling and tenderness at the injection site
- Fever • Decreased appetite • Irritability
- Increased sleep • Decreased sleep

Any side effects associated with the vaccination should be reported to your child's health care provider. These are not all of the possible side effects of Prevnar 13™. For a complete list, ask your child's health care provider.

NEED MORE INFORMATION?

- This is only a summary of important information. Ask your child's health care provider for complete product information.
- Go to www.prevnar13.com or call 1-800-666-7248.

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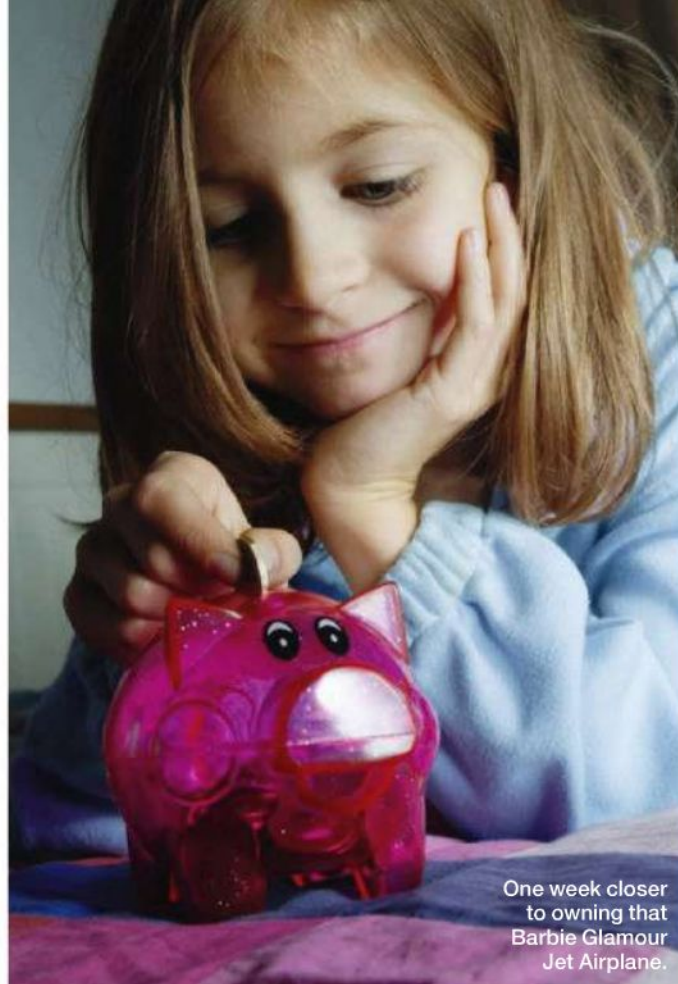
● **Ditch your desk.** More than half of workers spend their lunches hunched over keyboards, according to a recent poll. Step away! "Taking a break prevents burnout, so you'll actually be more productive," says Tony Schwarz, author of *The Way We're Working Isn't Working*. Too busy? Consider how much work time you waste on email or Facebook. (See shocking stat, page 23.)

● **Get moving.** The most beneficial breaks get your blood flowing, Schwarz says, so take a walk or hit the gym. Anything that gets your body moving helps reduce stress and clear your mind. Just don't spend every on-the-go break running errands, says Cathy Greenberg, coauthor of *What Happy Working Mothers Know*. Your brain can't relax while tackling a to-do list.

● **Give back.** Donating just a few lunch hours a month adds up. Go to dosomething.org to find volunteer opportunities, or offer to pitch in at a shelter or public library. You'll benefit too: A new study found that taking part in meaningful activities majorly boosted the long-term happiness of 150,000 adults surveyed. Your coworkers will appreciate your good mood! —NICOLE YORIO

RAISE YOUR KIDS TO BE RICH

Are you a money wimp with your children? In a recent survey by American Express, 36 percent of parents said that talking to their teens about allowance was more stressful than haggling with a car salesman. But experts say **we need to be clear and upfront if our kids are going to learn to handle money wisely.** Start a dialogue about allowance early, around when the “Gimme!” tantrums kick in at age 5 or 6, to help kids understand that they have to shell out themselves for the Magical Unicorn Pillow Pet they’re coveting. Avoid bribery tactics like “You’re not getting your allowance unless you clean your room,” says Carrie Schwab-Pomerantz, a certified financial planner and president of the nonprofit Charles Schwab Foundation. “An allowance should teach budgeting,” she says. “It’s not a reward for completing tasks kids should do anyway, like making their bed.” Schwab-Pomerantz *does* recommend doling out bonuses if your children do extra work, like shoveling snow. And promote long-term saving by matching their piggy-bank contributions, just like a 401(k) plan. In other words, act like a great bank, and your kids will become great savers. —JIHAN THOMPSON



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FIVE-MINUTE MONEY MANAGER

How to save an extra \$1,000 this year!

Do you have a secret money stash? You need and deserve one—so start now.

REDBOOK's money expert, Beth Kobliner, is the author of *Get a Financial Life* and is on the President's Advisory Council on Financial Capability.

I'm pretty sure you have \$3 in your wallet—or a jeans pocket, or your glove compartment, or balled up between the couch cushions. Here's what I want you to do with it: Get rid of will-I-wind-up-a-bag-lady anxiety *forever*. Many women I speak to say they're terrified of not having enough money put aside to take care of themselves when they're old. And they have reason to be worried: Twice as many women as men are poor in old age, according to the U.S. Census Bureau, and females have 40 percent less saved in retirement accounts than male officemates.

Plus, women in the United States live an average of five years longer than men. You're nowhere near old age, but it's time to save some money for you and you *alone*. With my plan, you won't even miss it.

STEP 1: Starting January 1, put aside \$3 a day (weekends too!) for the entire year. You can slip three bucks into an envelope every night, schedule a weekly automatic transfer of \$21 to a savings account, or move one big chunk all at once. But don't stop there—save \$5 a day or more if you can, and definitely continue contributing to a 401(k) plan at work if you have one.

STEP 2: Fast-forward a year. What do you do with the \$1,095 you've saved? Invest

in the stock market through mutual funds by opening a Roth individual retirement account, or IRA, that allows your money to grow tax-free. I prefer Vanguard's STAR Fund or Schwab's Total Stock Market Index Fund: You can start with \$1,000, and both charge low fees. The market *will* fluctuate, but many experts agree that these funds could give you a higher return rate than a bank savings account over a 20-year period.

STEP 3: Don't touch! If you're 35 and follow this plan until you hit 70, you'll have \$129,342, if you earned an average six-percent annual return. It's not a fortune, but it'll give you a priceless sense of security about your future.

\$3 EXPENSES YOU CAN LIVE WITHOUT



1 library book, 12 days past due



A third beer at happy hour



2 \$1.50 ATM withdrawal fees



1 dry-cleaned blouse (wear it an extra time!)



1 mini cup of fro-yo with toppings



A \$1 cell phone ringtone for each of your kids

Fact:



Children's Advil® brings fever down faster than Children's Tylenol.®

**Children's Advil also keeps your child's fever down longer.
Nothing is proven better on fever. Not even Children's Motrin.®
Look for Children's Advil in the cough/cold aisle today.**



Relief You Can Trust

Among OTC pain relievers. Brands are trademarks of their respective owner. Based on reducing fever below 100°F.

This mommy works at *The Office*



"My trailer at work is all set up for Isabel. I have Play-Doh and crayons and a pretend microwave. It's a total playroom."



"I'm learning to cook. It's hard to eat out with a 2-year-old, and I'm not going to be a takeout mom. I made my mom's Crock-Pot brisket recipe, and it was great."



"Motherhood would be impossible without Goldfish. They never go bad. I once found a week-old cheese stick at the bottom of my purse. Trust me, it was disgusting."

She's best known as the obsessive mastermind of Dunder Mifflin's party-planning committee, but in real life, newly single mom Angela Kinsey doesn't sweat the small stuff.

I keep my sisters on speed dial. I'm the only mother in the cast of *The Office*, so I rely on my mom and three sisters for support; I ask them stuff all the time. When I was breast-feeding, I called my sister a few times and said, "My boob is doing this and that. Is that normal?" Crazy things happen to your body when you breast-feed!

We get distracted at our job, too! I'm so thankful that the computers we sit behind on set actually work. I'll go on the Internet and say, "Oh, my goodness! Did you see who got extensions?" Or I'll instant-message Jenna [Fischer] between takes with something so lame, like, "Hey, I'm going to Target at lunch. Want to come?"

Privacy? What's that? I don't even shut the bathroom door anymore. Once you're a mom, that's it. I actually forgot to shut the door at a friend's house the other day. I was like, "Oh, my God. I'm so sorry!"

Funniness is genetic. Isabel [Angela's 2-year-old daughter] is hilarious. When I was having trouble putting my new SIM card in my cell phone, she said, "Mommy what is your problem?" So I told her, and she said, "Hmm, maybe I can help." And the other day, she told me my hair looked crazy and I needed to brush it.

Don't bother shooting for perfection—it's impossible! Some days I think, *I can do this. I'm a pro.* And other days I'm like, *I'm lousy at this.* I have a special place in my heart for working moms—it's a constant pull on your heartstrings. —AS TOLD TO NICOLE YORIO



"I bring my bike to work, and I make laps around our parking lot on my lunch break. The other day, I rounded the corner and Ed Helms was filming. I almost wiped out!"



"I love roller skating. I was talking to a friend who said, 'You've got to stop. I don't think it's age-appropriate anymore.'"

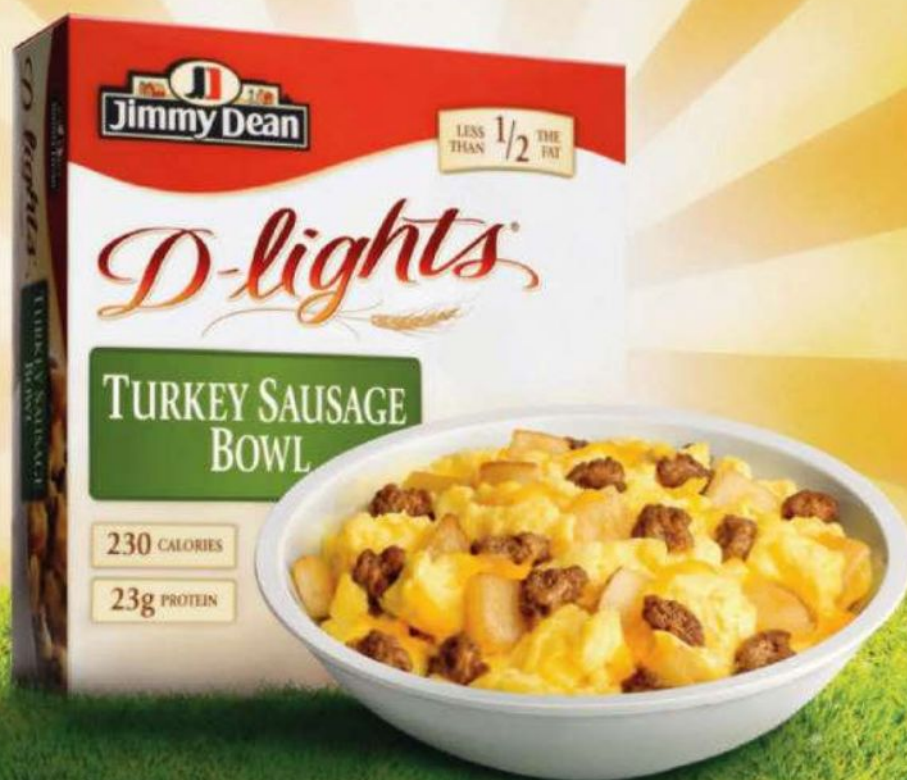


"Isabel and I dress up as princesses. We wear crowns and serve tea and cookies to the stuffed animals. Then, I don't know why, but we sing 'Frère Jacques.'"



"Isabel plays with the teddy bear, Henry, that my dad got me when I was 2. It's very special to me that she has him."

**~JUST 230 CALORIES~
YOU COULD BURN THAT OFF
TURNING THIS PAGE
...A FEW HUNDRED TIMES**



**TURKEY SAUSAGE, EGG WHITES, POTATOES
AND CHEESE. PART OF A BALANCED BREAKFAST
WITH PROTEIN FOR BIGGER DAYS.**

Shine On™

How to be the friend with money

Meet five former sorority sisters who've experienced everything from **bankruptcy** to bringing in seven figures—and learn how to wind up with all the **wealth** you want. By Jessica Press

Ginormous hair. It's the first thing you notice when you look at Phi Lambda Chi pledge-class pics from the mid-'80s. Big, crunchy waves and gravity-defying bangs. But while they all sported the hair, the Greek letters, and the frosted lip gloss, each woman in these photos had her own distinct financial personality. "We start forming our ideas about money at a very, very young age, but college is the first time you're in charge, the first time those ideas really express themselves," says personal finance expert Carmen Wong Ulrich, author of *The Real Cost of Living*.

Among these Phi Lamb sisters from the State University of New York, Geneseo, you'll find a budding frugalista, a big spender, and every money mentality in between. They're Sharon, Jonna, Sue, Nicole, and Melissa. All 44 now, they've experienced marriages and divorces, had children, forged careers, worked hard at home and outside of it. And while their financial personalities may have been formed during the age of Aqua Net, they continue to evolve as their lives—and the economy—constantly change. Today, nearly 25 years since graduation, Sue lives, as she says, "paycheck to paycheck," while Sharon owns a thriving business. Nicole, who's bounced back from bankruptcy,

is going back to school; Jonna says she's financially stable. And Melissa and her husband have a combined net worth of seven figures.

These friends all started in similar financial circumstances—no trust funds, no head starts from parents—so how'd they end up in such different places? Can they improve their money habits, guide each other, and all live large—or at least comfortably—from now on? We sent in the experts to find the takeaway for them, and for the rest of us.



- **Sharon then** Taught friends how to budget and bargain-hunt.
- **Defining moment** Had a son at 39, found a work-life balance.
- **What's next** "I want to make 'passive income' from my books and DVDs and retire comfortably," says the executive and life coach.

LESSON #1

Do what your parents did (if it worked)

"Sharon never wasted money—ever," says Melissa Radin of her sorority sister Sharon Lamm-Hartmann. "She was the one who divided up the electric bill and made sure we turned off the lights. She never blew money on clothes at the mall." Sharon says she was just following her family's example. "I had Depression-era parents who never wasted money; they even grew their own food. My dad devoted his life to supporting my three older sisters, my mom, and me." Sharon, who has master's and doctorate degrees, now owns an executive and life coaching business and earns an ample six figures.

But Jonna Shutowick had the opposite reaction to a very similar childhood: "I was raised with a 'put your money in a suitcase because you never know what'll happen' mentality," she says. "But I saw too many older people in my family die without doing anything joyful with their lives." So in college, Jonna chose happiness. "I figured, if you're working too hard and stressed about money, you're not having fun. I refused to live like that." Her friend Sue Austin says Jonna



Sue
Living
paycheck to
paycheck

Nicole
Rebounded
from
bankruptcy

Melissa
Seven-figure
portfolio

The 1986 Phi
Lambda Chi
pledge class at
SUNY Geneseo:
matching shirts
and hair, vastly
different financial
destinies.

succeeded: "Whatever she said we should do, we did. It always worked out."

Today, things still work out for Jonna: While she makes \$52,000 a year as a teacher, she and her entrepreneur husband, who earns a mid-six-figure salary, have made pleasure a priority—traveling to Europe every summer, moving from upstate New York to Florida for the better weather (and paying two mortgages for a while), and telling their two sons they'll send them to any college—always trusting that they'll find *some* way (from racking up points to cover their travels to cutting back on take-out and taxis) to pay their bills. "Often, after a big trip, we're down to zero," she says. "It can be stressful to play catch-up. My husband has to work more, and we cut back on spending. But I strongly believe in taking moderate risks to move forward. We never would have moved to Florida, which we now consider the best decision we've made, if we'd waited until we could actually afford it. I always figured I could go back to waitressing if need be—and I

still feel that way." Jonna and her husband aren't totally winging it: They have emergency retirement reserves, and they're frugal in other areas. "My car is 10 years old, and my clothes aren't fancy," she says. "My money goes toward travel, because that's what's important to us."

Sharon and Jonna are classic examples of the different ways people react to their financial upbringing, says Dr. Brad Klontz, a psychologist, associate research professor in personal financial planning at Kansas State University, and coauthor of *Mind Over Money: Overcoming the Money Disorders That Threaten Our Financial Health*. "Children from families with extreme relationships to money will follow in their parents' footsteps or do the exact opposite"—and face the consequences.

So how can women like Jonna strike a better balance? Jacquette Timmons, author of *Financial Intimacy* and the founder and CEO of Sterling Investments Management Inc., a financial coaching firm, says the key (which is not necessarily

easy) is to take stock of your past and adjust your habits. Whatever your indulgence is, she says—travel, shopping, decorating—look at how much you've spent on it over the last three years. Calculate your average annual spending on it; then give yourself a goal of, say, 10 percent less (an amount that won't overwhelm but will make a dent) and force yourself to stick to it. For example, you'd take a shorter trip to Europe or pick a cheaper destination. You still choose how to spend your money today—but you also sock away savings for the future.

LESSON #2

Denial is your enemy

Back in college, it was the ATM that really got Sue. "There were machines outside the places we'd hang out on weekends, which was not good," she says. Sue worked several jobs, but "when I was out having fun, I wasn't thinking about the future." Fifteen years after graduation, when she

and her husband got divorced, she found herself overwhelmed with credit card bills, a mortgage, and two car payments. "We didn't go crazy spending, but there were things we felt we needed, like a computer for my job and day care for our kids." She had to file for bankruptcy, and even now, as a successful and fulfilled kindergarten teacher, the single mother of two can't get a major credit card—and still feels financially clueless. She earns \$62,000 a year and receives \$1,200 a month in child support, but "by the time I get my paycheck, it's sucked up by the mortgage, the car, the groceries. I get so irritated watching my money go so quickly that I often ignore the whole situation, and that gets me into trouble. There are so many times there's a knot in my stomach, like, *Am I gonna make it this month?* I'm 44 years old—I should have more control over my money!"

Women like Sue *can* turn things around, Klontz says: "It helps to understand that your financial problems are not the result of your being lazy, crazy, or stupid. They stem from subconscious beliefs and behaviors rooted in childhood. Also, financial loss is a real loss; declaring bankruptcy can feel like a death, and grieving is normal. But it doesn't help to beat yourself up or bury your head in the sand. Instead, examine how past behaviors—overspending, taking big risks—have led you to this point."

Once you've *really* acknowledged your issues, it's time to tackle the nitty-gritty. For instance, free tools on websites such as wesabe.com and mint.com will crunch your numbers, set up a budget, and send low-balance or bill alerts to your phone or computer. "It's very gratifying and empowering to say, 'Let me once and for all clean out the cobwebs of my financial life,'" says Beth Kobliner, REDBOOK's money expert and the author of *Get a Financial Life*.

Nicole Ambarchian, a self-described risk taker whom Sue describes as "the creative free spirit of the group," successfully beat denial. "I arrived at college knowing nothing about finances," she says. "I always worked, but I acted like money grew on trees, and I had expensive taste—my first

big purchases were leather jackets and fancy perfume. After college, I turned a blind eye to spending, which led to major financial anxiety and debt." When a work-related lawsuit left Nicole with nothing but a 401(k) and the roof over her head, she too declared bankruptcy, which forced her to take a cold, hard look at her life. She worked short-term at a bank to bring in more income, then she and her now-ex-husband came up with a plan for expanding his business. A few years later, Nicole set up her own jewelry-design business, recognizing the value in a job with low overhead and the flexibility she needed as a mom to young kids. But she says it was the tiny changes that had the biggest impact: "Making my own coffee, borrowing books from the library, and going to free events in town really added up," says Nicole, who's debt-free now. "All these things helped me see that I have enough in my life."

Budget tweaks do make a difference, Wong Ulrich says. But major outlays matter more. "After declaring bankruptcy, you have to 'live smaller' than before. You need to assess the big-ticket items in your life—your home, your car—and figure out how to do with less of them." This can mean moving into a smaller place or downsizing to a cheaper model. And, she



→ **Jonna then** Vowed to enjoy life more than her parents did.

→ **Defining moment** A "once-in-a-lifetime" trip to Paris in 2005.

→ **What's next** More European vacations. "We treat the trips like a game, see how many points we can use."

adds, you need to make peace with the fact that it will take time, at least a few years, to bounce back financially. With Nicole's kind of discipline, it's possible.

LESSON #3

Find a financial role model and follow her lead

Melissa has a sophisticated portfolio of diversified investments—and, with her husband, a net worth in the low seven figures. But her earliest lesson in saving came in the form of little envelopes. "After my parents got divorced, when I was 11, things were very tight, and my mother had to quickly learn how to manage her money," Melissa recalls. "She kept envelopes all over the house to save for things. From her, I learned to never spend money I didn't have, to pay my bills religiously, and to save 10 cents of every dollar I earned, starting from when I worked two jobs in high school." She also learned never to rely on a man to support her (a common trait among money-savvy women, according to Klontz). "After my parents' split, I thought I'd never want to get married, and I was concerned about being old, alone, and unable to retire," Melissa says. So after getting a B.S. in business management and her master's degree, she hired a financial planner and asked him to set



→ **Sue then** Always at the ATM.

→ **Defining moment** Separated and declared bankruptcy in 2001.

→ **What's next** "I still can't get a credit card because of my bankruptcy. I'd like to get one—not to use, but as a cushion, just in case."

up automatic deductions from her paycheck for retirement savings. And when, after just one date, Melissa fell madly in love, then eloped four months later, she brought \$100,000 in savings into her marriage.

Today, Melissa, a former banker and now a mom of two, an adjunct business professor, and the founder of a small business that helps other moms budget, says the lessons she learned years ago have buoyed her and her husband through the recession. They still stay conscious of every dollar they spend: "I don't even go near the mall," she says.

"The fact is, most self-made wealthy people work more and save more than less wealthy people do," Klontz says. Indeed, Melissa and her husband spend most Saturday nights going out for Chinese food and bowling with friends, and she opts for at-home haircolor over going to the salon. "Before we spend anything, we ask each other, 'How much are you willing to pay for that—and what are you willing to give

up?'" And along with her sophisticated investments, Melissa still saves for luxuries like vacations or Broadway tickets just the way her mom did: with little envelopes.

Sure, a business degree helps, but anyone can be as successful as Melissa, Wong Ulrich says: "It isn't about how much you make. Every woman I know who's confident about money has asked herself, 'What's on top of my need pyramid?' What you value and want most in life is on the top, and everything else is guided by filling that need. For many, the 'need' to avoid debt and have total financial stability is their ultimate driving force." Others might be willing to stretch a bit if they yearn for something else, like an advanced degree or a remodeled kitchen. But the key, says Wong Ulrich, is to identify your priorities and make a few sacrifices to stick to them. Do that and your past financial mistakes won't matter any more than what your hair looked like 25 years ago. **R**

OUR MONEY MINDS:



Brad Klontz, Psy.D., is coauthor of *Mind Over Money: Overcoming the Money Disorders That Threaten Our Financial Health* and an associate research professor in personal financial planning at Kansas State University.



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Carmen Wong Ulrich is a personal finance expert, a former host of CNBC's *On the Money*, and a contributor to *The Dr. Oz Show*, *Today*, *The View*, and CNN. Her latest book is *The Real Cost of Living*.



Worried about your financial future? For the best sites on budgeting, coping with debt, and planning for retirement, go to redbookmag.com/moneysites.



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Get in shape, save the world!

You're more likely to stick to that or any other **resolution** if you tie it to a **cause** you care about. We've got 9 ideas to inspire you.



Carly, Nancy Jones, Tricia Smith, and Kara ready to race at a Girls on the Run 5K last spring.

Lose weight

1 Pledge to slim down with *The Biggest Loser's* Pound for Pound Challenge at pfpchallenge.com. For every pound you drop, the program will donate 14 cents to Feeding America, enough to supply a food bank with one whole meal.

2 Burn calories training for a 5K race (that's 3.1 miles—very doable!) with Girls on the Run International, an organization that uses fitness to boost girls' self-esteem. "When I heard about this in 2009, I was struggling to get back in shape after having a baby three months before and could barely run a mile," says Jen Kononan Guinness, 31, a volunteer coach in Charlotte, NC. "Now I'm in great shape, but the best part of crossing the finish line with the girls is seeing them beam with pride." Become a running buddy for a girl in your city at girlsontherun.org.

3 Ask friends and family to sponsor you in a walkathon for your favorite cause. (Hey, who says you have to run in order to get fit?) Browse charitywalksblog.com's list for walks in your town.

Clear out the clutter

4 Give gently worn slacks, skirts, and blazers to Dress for Success (dressforsuccess.org), which outfits disadvantaged women with professional work clothes. "Many of our clients have never owned a suit before," says CEO Joi Gordon. "Thanks to donations, we can help a woman look great and give her the confidence she needs when she goes on an interview. We already know she's qualified, but we help her look like it too." To get even more involved, organize a suit drive at your office!

5 Donate old cell phones, digital cameras, and iPods to recyclingforcharities.com, a group that will resell your used gadgets, then give half the money to a charity of your choice.

A family goes green with the American Hiking Society.



6 Send old tools to Habitat for Humanity. The nonprofit will sell the donated goods at a discounted price through their ReStores and use the proceeds to fund the construction of houses for homeless families. Go to habitat.org/restores to find one near you.

De-stress

7 Relax with friends by throwing a spa party! Invite pals over for in-home massages by licensed therapists through massagesforcharity.com. Each guest pays \$50, half of which goes to a charity that you select. "I started raising money for the Leukemia and Lymphoma Society after my dad was diagnosed 10 years ago, but it gets hard to ask people for money year after year," says Rozella Triezenberg, 39, of Homewood, IL. "This was a great way to get people excited about giving again. At my last party, I raised \$500."

8 Vacation with the American Hiking Society and help rebuild trails and plant trees in one of the country's national parks. Sign up at americanhiking.org/volunteer/vacation.aspx.

9 Knit a blankie for Project Linus. Repetitive, mindful activities like knitting can relieve stress—and your blanket will warm a child in a hospital or shelter. Find a Project Linus chapter in your area at projectlinus.org/chapter.php.

—JIHAN THOMPSON



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Because you're busy, you need birth control that helps simplify your life.



Consider Mirena®

Mirena is birth control you don't have to think about every day, or even every year. It's a small intrauterine contraceptive made of soft, flexible plastic that's put in place by your healthcare provider during an office visit and all you have to do is check the threads of Mirena once a month.

What else you should know about Mirena:

- Over 99% effective at preventing pregnancy for as long as you want for up to five years
- One of the most effective forms of birth control
- Once removed, you can try to get pregnant right away
- First and only contraceptive that's FDA approved to treat heavy periods
- In a clinical trial of women with heavy periods and treated with Mirena, the majority had an 80% reduction in bleeding as early as 3 months. At 6 months, the majority had over a 90% reduction in bleeding.
- **Indications & Usage:** Mirena (levonorgestrel-releasing intrauterine system) is a hormone-releasing system placed in your uterus to prevent pregnancy for as long as you want for up to 5 years. Mirena also treats heavy periods in women who choose intrauterine contraception.
- **Important Safety Information:** Only you and your healthcare provider can decide if Mirena is right for you. Mirena is recommended for women who have had a child. Don't use Mirena if you have a pelvic infection, get infections easily or have certain cancers. Less than 1% of users get a serious infection called pelvic inflammatory disease. If you have persistent pelvic or abdominal pain, see your healthcare provider. Mirena may attach to or go through the wall of the uterus and cause other problems. If Mirena comes out, use back-up birth control and call your healthcare provider. Although uncommon, pregnancy while using Mirena can be life threatening and may result in loss of pregnancy or fertility. Ovarian cysts may occur and usually disappear. Bleeding and spotting may increase in the first few months and continue to be irregular. Periods over time may become shorter, lighter or even stop. Mirena does not protect against HIV or STDs. For important risk and use information about Mirena please see the brief summary of patient information on reverse side.

To learn more about Mirena,
call 1-877-MIRENA-2 or visit www.mirena-us.com

 **Mirena®**
(levonorgestrel-releasing intrauterine system) 20 mcg
per day
Keep life simple.

You are encouraged to report negative side effects of prescription drugs to the FDA.
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(levonorgestrel-releasing intrauterine system)

BRIEF SUMMARY OF PATIENT INFORMATION

(Consult Patient Insert for complete patient information)

For more information about Mirena, visit mirena-us.com.

Mirena does not protect against HIV infection (AIDS) and other sexually transmitted diseases.

This information does not take the place of talking with your gynecologist or other healthcare provider who specializes in women's health. If you have any questions about Mirena, ask your healthcare provider. You should also learn about other birth control methods to choose the one that is best for you.

Who might use Mirena?

You might choose Mirena if you:

- Want birth control that provides a low chance of getting pregnant (less than 1 in 100)
- Want birth control that is reversible
- Want a birth control method that does not require taking it daily
- Have had at least one child
- Want treatment for heavy periods and want to use a birth control method that is placed in the uterus to prevent pregnancy.

Who should not use Mirena?

Do not use Mirena if you:

- Might be pregnant
- Have had a serious pelvic infection called pelvic inflammatory disease (PID) unless you have had a normal pregnancy after the infection went away
- Have an untreated pelvic infection now
- Have had a serious pelvic infection in the past 3 months after a pregnancy
- Can get infections easily. For example, if you have:
 - More than one sexual partner or your partner has more than one partner
 - Problems with your immune system
 - Intravenous drug abuse.
- Have or suspect you might have cancer of the uterus or cervix
- Have bleeding from the vagina that has not been explained
- Have liver disease or liver tumor
- Have breast cancer now or in the past or suspect you have breast cancer
- Have an intrauterine device in your uterus already
- Have a condition of the uterus that changes the shape of the uterine cavity, such as large fibroid tumors
- Are allergic to levonorgestrel, silicone, or polyethylene.

Before having Mirena placed, tell your healthcare provider if you:

- Have had a heart attack
- Have had a stroke
- Were born with heart disease or have problems with your heart valves
- Have problems with blood clotting or take medicine to reduce clotting
- Have high blood pressure
- Recently had a baby or if you are breast feeding
- Have diabetes (high blood sugar)
- Use corticosteroid medications on a long-term basis
- Have severe migraine headaches.

How is Mirena placed?

First, your healthcare provider will examine your pelvis to find the exact position of your uterus. Your healthcare provider will then clean your vagina and cervix with an antiseptic solution, and slide a thin plastic tube containing Mirena into your uterus. Your healthcare provider will then remove the plastic tube, and leave Mirena in your uterus. Your healthcare provider will cut the threads to the right length. Placement takes only a few minutes during an office visit.

You may experience pain, bleeding or dizziness during and after placement. If these symptoms do not pass 30 minutes after placement, Mirena may not have been placed correctly. Your healthcare provider will examine you to see if Mirena needs to be removed or replaced.

Should I check that Mirena is in the proper position?

Yes, you should check that Mirena is in proper position by feeling the removal threads. You should do this after each menstrual period. First, wash your hands with soap and water. Feel for the threads at the top of your vagina with your clean fingers. The threads are the only part of Mirena you should feel when Mirena is in your uterus. Be careful not to pull on the threads. If you feel more than just the threads, Mirena is not in the right position and may not prevent pregnancy. Call your healthcare provider to have it removed. If you cannot feel the threads at all, ask your healthcare provider to check that Mirena is still in the right place. In either case, use a non-hormonal birth control method (such as condoms or spermicide) until otherwise advised by your healthcare provider.

How soon after placement of Mirena should I return to my healthcare provider?

Call your healthcare provider if you have any questions or concerns (see "When should I call my healthcare provider?"). Otherwise, you should return to your healthcare provider for a follow-up visit 4 to 12 weeks after Mirena is placed to make sure that Mirena is in the right position.

What if I become pregnant while using Mirena?

Call your healthcare provider right away if you think you are pregnant. If you get pregnant while using Mirena, you may have an ectopic pregnancy. This means that the pregnancy is not in the uterus. Unusual vaginal bleeding or abdominal pain may be a sign of ectopic pregnancy.

Ectopic pregnancy is a medical emergency that often requires surgery. Ectopic pregnancy can cause internal bleeding, infertility, and even death.

There are also risks if you get pregnant while using Mirena and the pregnancy is in the uterus. Severe infection, miscarriage, premature delivery, and even death can occur with pregnancies that continue with an intrauterine device (IUD). Because of this, your healthcare provider may try to remove Mirena, even though removing it may cause a miscarriage. If Mirena cannot be removed, talk with your healthcare provider about the benefits and risks of continuing the pregnancy. If you continue your pregnancy, see your healthcare provider regularly. Call your healthcare provider right away if you get flu-like symptoms, fever, chills, cramping, pain, bleeding, vaginal discharge, or fluid leaking from your vagina. These may be signs of infection.

It is not known if Mirena can cause long-term effects on the fetus if it stays in place during a pregnancy.

How will Mirena change my periods?

For the first 3 to 6 months, your monthly period may become irregular and the number of bleeding days may increase at first. You may also have frequent spotting or light bleeding. A few women have heavy bleeding during this time. After your body adjusts, the number of bleeding days is likely to lessen, and you may even find that your periods stop altogether.

In some women with heavy bleeding, the total blood loss per cycle progressively decreases with continued use. The number of spotting and bleeding days may initially increase but then typically decreases in the months that follow.

Is it safe to breast-feed while using Mirena?

You may use Mirena when you are breastfeeding if more than six weeks have passed since you had your baby. If you are breastfeeding, Mirena is not likely to affect the quality or amount of your breast milk or the health of your nursing baby. However, isolated cases of decreased milk production have been reported among women using progestin-only birth control pills.

What are the possible side effects of using Mirena?

Mirena can cause serious side effects including:

- **Pelvic inflammatory disease (PID).** Some IUD users get a serious pelvic infection called pelvic inflammatory disease. PID is usually sexually transmitted. You have a higher chance of getting PID if you or your partner have sex with other partners. PID can cause serious problems such as infertility, ectopic pregnancy or pelvic pain that does not go away. PID is usually treated with antibiotics. More serious cases of PID may require surgery. A hysterectomy (removal of the uterus) is sometimes needed. In rare cases, infections that start as PID can even cause death.
- Tell your healthcare provider right away if you have any of these signs of PID: long-lasting or heavy bleeding, unusual vaginal discharge, low abdominal (stomach area) pain, painful sex, chills, or fever.

- **Life-threatening infection.** Life-threatening infection can occur within the first few days after Mirena is placed. Call your healthcare provider if you develop severe pain within a few hours after Mirena is placed.

- **Embedment.** Mirena may become attached to the uterine wall. This is called embedment. If embedment happens, Mirena may no longer prevent pregnancy and you may need surgery to have it removed.

- **Perforation.** Mirena may go through the uterus. This is called perforation. If your uterus is perforated, Mirena may no longer prevent pregnancy. It may move outside the uterus and can cause internal scarring, infection, or damage to other organs, and you may need surgery to have Mirena removed.

Common side effects of Mirena include:

- **Pain, bleeding or dizziness during and after placement.** If these symptoms do not stop 30 minutes after placement, Mirena may not have been placed correctly. Your healthcare provider will examine you to see if Mirena needs to be removed or replaced.
- **Expulsion.** Mirena may come out by itself. This is called expulsion. You may become pregnant if Mirena comes out. If you notice that Mirena has come out, use a backup birth control method like condoms and call your healthcare provider.
- **Missed menstrual periods.** About 2 out of 10 women stop having periods after 1 year of Mirena use. If you do not have a period for 6 weeks during Mirena use, call your healthcare provider. When Mirena is removed, your menstrual periods will come back.
- **Changes in bleeding.** You may have bleeding and spotting between menstrual periods, especially during the first 3 to 6 months. Sometimes the bleeding is heavier than usual at first. However, the bleeding usually becomes lighter than usual and may be irregular. Call your healthcare provider if the bleeding remains heavier than usual or if the bleeding becomes heavy after it has been light for a while.
- **Cyst on the ovary.** About 12 out of 100 women using Mirena develop a cyst on the ovary. These cysts usually disappear on their own in a month or two. However, cysts can cause pain and sometimes cysts will need surgery.

This is not a complete list of possible side effects with Mirena. For more information, ask your healthcare provider.

Call your doctor for medical advice about side effects. You may report side effects to the manufacturer at 1-888-842-2937, or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

After Mirena has been placed, when should I call my healthcare provider?

Call your healthcare provider if you have any concerns about Mirena. Be sure to call if you:

- Think you are pregnant.
- Have pelvic pain or pain during sex.
- Have unusual vaginal discharge or genital sores.
- Have unexplained fever.
- Might be exposed to sexually transmitted diseases.
- Cannot feel Mirena's threads.
- Develop very severe or migraine headaches.
- Have yellowing of the skin or whites of the eyes. These may be signs of liver problems.
- Have a stroke or heart attack.
- Or your partner becomes HIV positive.
- Have severe vaginal bleeding or bleeding that lasts a long time.

General advice about prescription medicines

Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. This leaflet summarizes the most important information about Mirena. If you would like more information, talk with your healthcare provider. You can ask your healthcare provider for information about Mirena that is written for health providers.

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You so deserve this month's **guilty pleasures**: 2 batty new TV shows, on-set **gossip** from Sofia Coppola's new flick, and an addictive memoir.



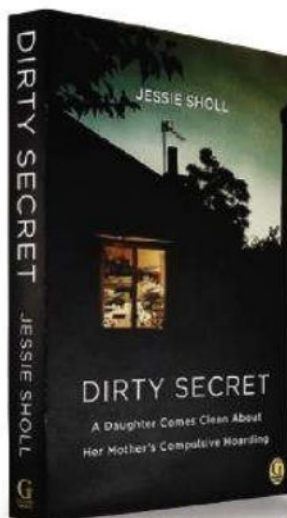
DOWNLOAD IT!

The veteran and the rookie



► **THE VETERAN:** Producer Jack White does for **Wanda Jackson**, a.k.a. the Queen of Rock, what he did for Loretta Lynn. On *The Party Ain't Over*, Jackson proves she's as hip and gritty as ever. Who cares that her first hit was back in 1958? She's *fierce*.

► **THE ROOKIE:** **Christina Perri** is only 24, but her debut album's heartbreak songs will resonate with anyone. The ballad "Jar of Hearts" hits home when life's not going your way; "Bang Bang Bang" is the revenge song you'd write about your worst ex.



WATCH IT!

NEED A REALITY CHECK?

Tune in to Showtime's *Shameless*, a remake of an award-winning British series. William H. Macy stars as the generally drunk head of the struggling Gallagher household. (*Dysfunctional* doesn't even begin to describe them.) But it's the unexpectedly sweet family camaraderie that'll really draw you in. Debuts January 9, 10 p.m. ET.



NEED TO CHECK OUT?

Try *Winter Wipeout*, the snow-bound version of ABC's hilarious summer hit. Contestants risk life and limb in an obstacle course of ice and avalanches. Is it okay to revel in other people's pain? In this case, absolutely! Debuts January 6, 8 p.m. ET.

KNOW ALL ABOUT IT!

BEHIND THE SCENES OF SOMEWHERE

In Sofia Coppola's new film, bad boy movie star Johnny Marco (Stephen Dorff) spars with a former fling played by Michelle Monaghan. She told us how Coppola exposed Hollywood's secret solution to its short-guy problem: "Johnny and I are doing press for a movie," she explains. "Stephen's shorter than me," but instead of hiding it—the standard practice—"we thought it would be funny to make it part of the scene. So we're posing for pictures, and it pulls back, and you see that Stephen's on a wooden apple box. Sofia said to me, 'You're exes, so he's being a total jerk.'" Well, they sure made him look like one!



Monaghan and Dorff in *Somewhere*



READ IT!

WHEN MOM'S A HOARDER

In her brutally honest memoir *Dirty Secret*, Jessie Sholl examines what it's like to grow up with a mom who ODs on *stuff*: "I decide to start in the living room....

It's crowded with sewing machines, foot massagers still in their boxes, old magazine clippings, two banged-up motorcycle helmets, half-consumed boxes of donuts.... There's just so much junk, so much worthless, heartbreaking junk."

CLICK IT!

Let's do the time warp again

The You Tube Time Machine (yttm.tv) is a treasure trove of pre-selected pop culture clips. Just set the dial to a year (we love the '80s, natch) and let the nostalgia wash over you via TV show themes, movie trailers, commercials, and music videos. We can't stop!



HAIR: ALBERTO GUZMAN FOR TRESEMME AT RAYBROWNPRO.COM. MAKEUP: CYNTHIA SOBEK AT SEE MANAGEMENT USING AVENE SKINCARE AND DIOR COSMETICS. MANICURE: SOPHIA SHUSTEROV FOR MAC PRO AT JUDY CASEY INC. STYLISTS: KEMAL & KARLA AT THE WALL GROUP. CASHMERE CARDIGAN SLIP DRESS: NO-LITA KNITWEAR. PROP STYLIST: LISA FRANTZ AT WALTER SCHUPPER MANAGEMENT. CASHMERE THROW: WHITE & WARREN. FUR BLANKET: WEST ELM. ILLUSTRATIONS BY BROWN BIRD DESIGN.

The real deal from reality TV stars:

"How I lost the weight"

FORGET CATFIGHTS AND BREAKUPS—WE WANT CELEB SECRETS TO A GREAT BODY! USE THEM TO FLATTEN YOUR BELLY (AFTER A BABY, AFTER 40, AFTER TOO MANY HOLIDAY COOKIES) AND SLIM DOWN EVERYWHERE ELSE.

Alison Sweeney

The mom of two, host of 'The Biggest Loser,' and star of 'Days of Our Lives' wasn't busy enough, so she wrote a book! The Mommy Diet hits stores this month.

Q In your book you talk about doing a "shape-up week," where you exercise and focus on eating healthy. Is that your answer to crazy Hollywood cleanses?

A It's my get-ready-for-a-photo-shoot, big-event type of thing, but I also use it when I find myself slipping into old habits. I have done the Master Cleanse in the past, but it's not good for you. You totally mess up your metabolism! My shape-up week means cutting out alcohol, red meat, and sugar, exercising every day, and pampering myself, whether it's with a mani-pedi, a haircut, or a new book.

Q Is it hard to do that around your kids?

A Yes—that's why I don't expect anyone to spend their life like that. You have to arm yourself with healthy options so you're not totally torturing yourself. Almonds are a big snack for me. I also like Greek yogurt and fruit salad with grapefruit, mint, and apple slices.

Q How do you make time for exercise?

A On days when I'm taping both *Days* and *Biggest Loser*, I go to the gym from 11 a.m. to noon. Or I work out at night, after I put my kids to bed. I do [*Biggest Loser* trainer Bob

Harper's DVD] *Yoga for the Warrior*—it's brutal. If I never had to work again, I'd take an hour and a half yoga class every other day and spin every day. I find those workouts so satisfying. Once I was in spin class just after the baby was born, and they played James Blunt's "You're Beautiful" and I seriously started to cry. I was embarrassed, but it felt so good and I was so proud of what I was doing about my life and my body, and there was something so cathartic about the whole thing.

Q You look amazing. Was bouncing back after pregnancy tough for you?

A Getting back in shape after my first baby, in 2005, was really difficult. I thought, *I'll worry about it later. I'm focused on this new person in my life.* Then one month turned into three, and then a year, and I felt defeated because I couldn't lose those 10 to 15 extra pounds. With my second, in 2009, I had more knowledge about weight loss from the show and I had a goal of wanting to look great at the finale, four months after my daughter was born. I really wanted that transformation, just like the contestants.

Ali's best Biggest Loser weight-loss tip:

"I was a really conscientious eater during the day, but then at night I found myself snacking on the worst stuff. [*Biggest Loser* trainer] Jillian Michaels said I was just tired and craving energy; my body needed more fuel to stay awake. So now, when I crave sugar at night, I go to bed."

By Marisa Fox Photographed by Gilles Bensimon

After five years hosting Top Chef, Padma Lakshmi knows how to shed the 10 pounds she gains each season. But baby weight was a new challenge. Here's how she dealt.

Q It must be difficult being on TV while your weight is fluctuating.

A Yeah. You feel judged, whether people say it or not. My book is intended to support the moms. So many women come to *The Biggest Loser* campus because as soon as that child is born, they dedicate their entire life to taking care of him or her and forget themselves. I want to embrace them and tell them that [taking care of yourself] is not selfish. You need to take ownership, feel like you're worth it, and invest in yourself.

Ali's flat-belly move: Turkish get-ups

Ali learned these from *Biggest Loser* trainer

Bob Harper:



Lie on your back with knees slightly bent, holding a 5-lb weight (a detergent bottle works too) over your chest, right arm out to the side for support. Keeping belly pulled in and weight over your head, sit up; let right leg drop to the floor and come up onto one knee, as shown, then to standing. Reverse the move to lie back down. Repeat with weight in the other hand. Aim for 10 reps.

there, and you can progress and change. **Q** The show seems to really be about building self-confidence.

A You're changing your mind-set about weight. For me, I stopped setting a goal that I had to be "skinny." I set up a goal to be as healthy as possible. That made a huge difference in my success rate. I wasn't failing all the time because I wasn't skinny. And then when you look at it as a lifestyle instead of being on a "diet," then that also gives you a sense that you're not failing if you go to a party and you end up not making the right choices. You didn't fail in your diet; it's just one day in your whole life, so tomorrow, make a better choice.

Q What was your biggest surprise about your body post-baby?

A That I liked myself at a bigger size. I wanted to lose the weight, but I thought I was doing something more important than tending to my vanity. You look at your body totally differently. It created this life and brought it into the world.

Q Unlike a lot of celebrities, you didn't seem to be on a fast track to slim down after you had Krishna in February.

A I gained about 38 pounds total, and I was beginning to feel like I was never going to lose the weight, but from one week to the next, I would. Before I knew it, I had dropped 10 pounds.

Q What advice do you have for women trying to lose baby weight?

A Eat right and exercise and do what you can, but there is a certain portion of what happens to you that isn't in your control. It took nine months to put on the weight, and it'll probably take nine months to lose all the weight. So don't pressure yourself and feel bad.

Q Speaking of weight loss, you gain 10 to 15 pounds from all the eating in each season of *Top Chef*. What is your trick for shedding those pounds quickly?

A I cut out sweets, red meat, alcohol, and cheese, except for low-fat cottage cheese, for three to four weeks. I basically have veggies, fish, brown rice, and egg-white omelets. Now, because I'm nursing, I'll have one piece of toast and a poached egg, half a grapefruit, and coffee or tea for breakfast. And for lunch I may have fish, veggies, and garbanzo beans or a turkey burger. For dinner, I like a big bowl of Vietnamese noodles with chicken or shrimp.

Q Do you have any time to work out?

A I really don't. Whatever extra time I have, I sleep. I was very sleep-deprived [at first] from work plus the crazy hours I had with a newborn at home. So I

didn't have time for long workouts at the gym, so I'd run up and down the stairs in my building in the morning for 45 minutes or jump rope. Skipping rope is great because you can throw it in your suitcase and do it anywhere.

Q I've heard that eating spicy foods is a great way to eat less and lose weight. Do you find that to be true?

A I love spicy food. Anyone can make a good dish if they add bacon, cream, or butter; a great cook can make something low-calorie that still tastes amazing. Spices help you do that. That's why I started my spice company [Easy Exotic] with HSN. We make five blends. The Latin one has chipotle and citrus and is great for grilled meat or fish or in guacamole.

Q What other tips do you have to make cooking easy for busy moms?

A You know you're going to use onions, garlic, and peppers, so chop it all on the weekend and store it in Ziploc bags so that when you get home, you can prepare a meal fast.

Q When you tape *Top Chef*, do you ever look at a dish and go, "Oh, no, there's 800 calories in that!"?

A No, I can't do that. It would ruin it. I'm judging whether a dish is executed well, not how healthy it is. The chefs put their heart and soul in it, so I want to do my part passionately as well.

Padma's flat-belly move: Side plank

Get in push-up position, with your arms bent and forearms on the floor, pulling belly button in and up. This is a plank. Hold for one minute (or as long as you can).



Now, twist your body to the right, shifting your weight onto the edge of your right foot. Stack your left foot on top of the right, raise your left arm straight up, and hold for a few counts. Return to plank, pause, then switch sides and repeat. That's one rep; try to do three.

HAIR: JUTTA WEIS AT LORIAMLIN. MAKEUP: KRISTOFER BUCKLE AT THE WALL GROUP. MANICURE: OLYA TITOVA FOR SEPHORA BY OPI AT JUDY CASEY INC. STYLISTS: KEVAL & KARLA AT THE WALL GROUP. CASHMERE SMOKING JACKET: CHRISTOPHER FISHER. BUSTIER: TORN BY RONNY KOB. SHORTS: JULIANNE. JEWELRY: THE PADMA JEWELRY COLLECTION BY PADMA LAKSHMI. PROP STYLIST: LISA FRANTZ AT WALTER SCHUPFER MANAGEMENT. CASHMERE THROW: MAGASCHONI. KNIT WOOL THROW: WEST ELM.

"I WANTED TO
LOSE THE BABY
WEIGHT, BUT
I WAS DOING
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MORE IMPORTANT
THAN TENDING
TO MY VANITY...
AND I LIKED
MYSELF AT
A BIGGER SIZE."

*Padma's body-love
wisdom for new moms:*

"Be patient with yourself and give yourself compassion. It's about consistency. You're not going to lose 20 to 30 pounds in a month, nor should you. You can still feel feminine and beautiful and strong whether you're a size 12 or a size 2."

"I'M COMPLETELY DONE WITH WOMEN BEING REWARDED
FOR BAD BEHAVIOR. I'M HAPPY, AND I LOVE MY LIFE."



Bethenny Frankel

We love the queen of the Skinnygirl empire for her brutal honesty and overshares. Now, she spills to us about leaving Real Housewives, baby number two, and her personal eating plan.

Q You were so thin weeks after having Bryn in May. How did you do it?

A I didn't binge when I was pregnant. Most people treat pregnancy like the big binge, and then they can't take the excess weight off so they go on a crash diet. I was mellow about it and reasonable. You don't have to be eating Krispy Kreme doughnuts. When people find out you're pregnant, they're like, 'Oh, my God, you're going to gain all this weight and you're going to get hemorrhoids and you're not going to be able to go to the bathroom.' I didn't listen to anyone; I knew I was going to do it my way.

Q Are you strict about what you eat?

A My only slap-on-your-hand "don't" is bingeing. It leads to eating out of emotion. You're not bad if you eat; you're not good if you don't. Food is not your best friend or enemy.

Q Were you an emotional eater?

A Absolutely. I used to get drunk and binge on everything in the deli, and then do a juice fast or starve, then do it all over again.

Q How did you get yourself off that roller coaster?

A I was going on a trip to Italy in 2006. Usually when I traveled, I had anxiety about food. I would deprive myself and then overdo it on the last day. This time I decided I was going to try everything and enjoy it. I realized there was no reason to be terrified of a cappuccino or a plate of pasta. I started following my instincts. If I had dessert, maybe I wouldn't have bread or wine. I figured out what I wanted, and treated my diet like a bank account. If I have this, then I won't have that. My eating philosophy evolved from there, and now I don't even think about it.

Q You're crazy-busy. How do you fit in exercise?

A That's where my yoga DVD comes in [*Body by Bethenny*]. It's only 40 minutes, and I do it two

to three times a week. Sometimes I split it into two or three parts. You shouldn't dread working out. Exercise is like an old friend: You may not be able to see that friend all the time, but you're not mad when you see them, you're happy, and you get right back into it. I do yoga at night with my husband [after] we put the baby down. I say, a family that namastes together stays together.

Q Okay, one question about *Real Housewives of New York City*. How hard was it to leave?

A Hard to leave *Housewives*? It was the easiest thing to do! I'm completely done with women being rewarded for bad behavior. I'm happy, and I love my life. I don't bite the hand that feeds me, and I'm very grateful to Bravo, but thank God I got out of that alive. It was fun the first season. Then it got not fun, and then it got scary and unhealthy and disgusting.

Q You recently turned 40. Any thoughts or fears about that?

A I would love to have a second child, and it's not something I have time to wait for. You really experience your biological clock if you're my age.

Q Tell me about your next book. What's the idea behind it?

A It's called *A Place of Yes*, and it's about getting what you want out of your life. That doesn't mean I'm always positive and always in a great mood, because I'm not. It's about my experiences and how I handled them, like how people told me my first book was going to fail and it was a *New York Times* best-seller for five months.

Q How did you become so good at casting away self-doubt?

A I just know that it's possible, and keep going. It's like driving: Stay in your lane. I couldn't pay my rent four years ago. I didn't know if I'd ever have kids or get married, and I found my way. No matter where you are and what you're doing, go get it. **R**

Bethenny's flat-belly move: Boat pose

Yoga instructor **Kristin McGee** created this move for Bethenny's DVD, *Body by Bethenny*: Sit on the floor with your legs straight, hands on the floor just behind your hips for support. With your back straight, lean back to a 45-degree angle, then bend your knees and lift your legs so calves are parallel to the floor.



Bring arms to your sides in front of you at shoulder level, as shown. This is the starting position. Pull your belly in and slowly lean further back, until shoulder blades are a few inches from the floor. Hold for five counts, and return to start. Repeat five times.

Bethenny's listen-to-your-body diet advice:

"If it's 8 a.m. and you want hot chocolate and watermelon instead of some egg-white omelet you're supposed to eat, have it. It's not really balanced, so just make up for it at the next meal with fish and salad. Diets are cookie-cutter, but lives are not."

More, more, more...

Simple ways

SURPRISINGLY SANE WEIGHT-LOSS WISDOM FROM SOME OF



Kelly Osbourne

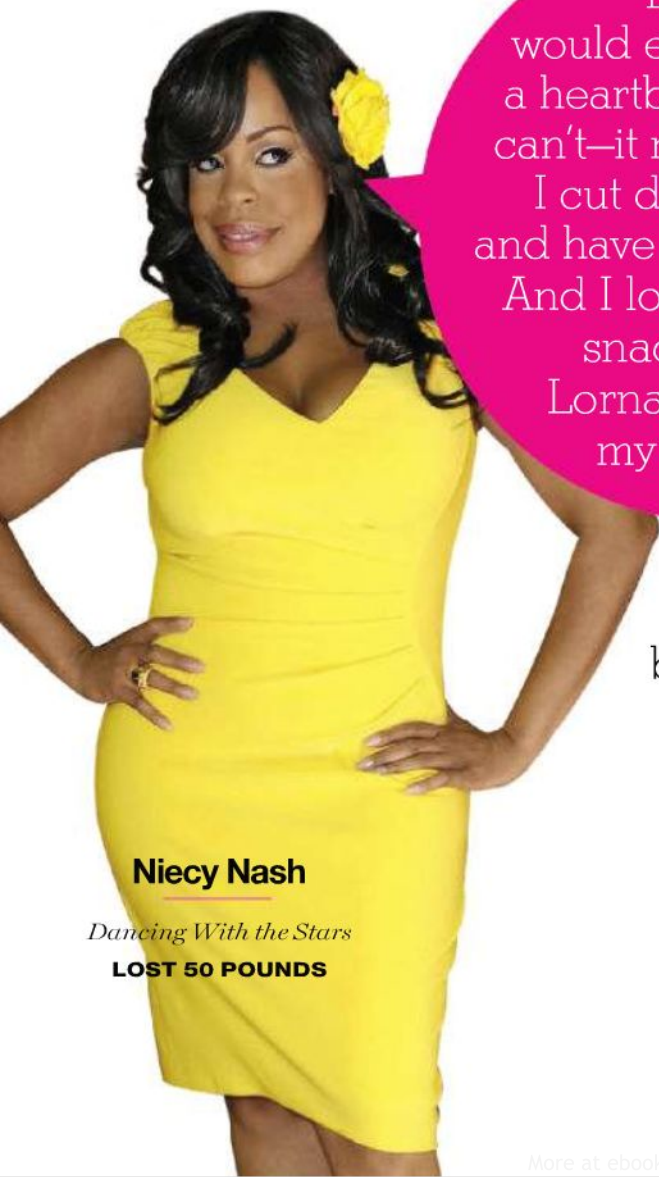
Dancing With the Stars

LOST 50 POUNDS

KELLY'S FAVORITE BELLY MOVE

"Kelly's waistline was her weakest area in terms of strength and appearance, but she got dramatic results doing core work, like these twists, on a Bosu ball," says her trainer, Sara Hagaman. To do:

- **A** Rest the small of your back on a stability ball or Bosu (it looks like half a ball) with knees bent. Hold arms out to the sides at shoulder level, in a T.
- **B** Straighten left leg, lift it off the ground, and twist to reach your right hand toward your left calf.
- **C** Switch sides, lifting right leg and bringing left hand to right calf. That's one rep. Do 15 reps.



Niecy Nash

Dancing With the Stars

LOST 50 POUNDS

"Before, I would eat fast food in a heartbeat, but now I can't—it makes me sick! I cut down on pork and have fish or chicken. And I love 100-calorie snack packs—Lorna Doone are my favorite!"



"I eat carbs, fat, and protein to feel full. But if I need to slim down fast, I cut out dairy and starch. I have starches from the earth like sweet potatoes, but no refined flour."

Melissa Joan Hart

Dancing With the Stars

LOST 50 POUNDS AFTER BABY

"Jennifer had a new baby, so she walked with a stroller and used workout DVDs. Being fit motivated her to change her diet."

—FROM HER TRAINER, HARLEY PASTERNAK

Jennifer Hudson

American Idol

LOST SEVERAL SIZES WITH EXERCISE AND WEIGHT WATCHERS



THIS PAGE, CLOCKWISE FROM TOP LEFT: AXELLE/BAUER-GRIFFIN.COM, DAVID LIVINGSTON/STRINGER/GETTY IMAGES, DIMITRIOS KAMBOURIS/GETTY IMAGES, JAYME OAK/STARTRAKSPHOTO.COM, OPPOSITE PAGE, CLOCKWISE FROM TOP LEFT: DONALD BOWERS/GETTY IMAGES, PAUL ARCHULETA/GETTY IMAGES, LIV/BAUER-GRIFFIN.COM, ANDREW MACPHERSON/CORBIS OUTLINE.

to get slim

TV'S WACKIEST STARS! BY JESSICA BAUMGARDNER



**Kendra
Wilkinson**

"I FOCUS ON
BEING FIT
INSTEAD OF A
NUMBER ON
THE SCALE."

*The Girls Next Door
and Kendra*

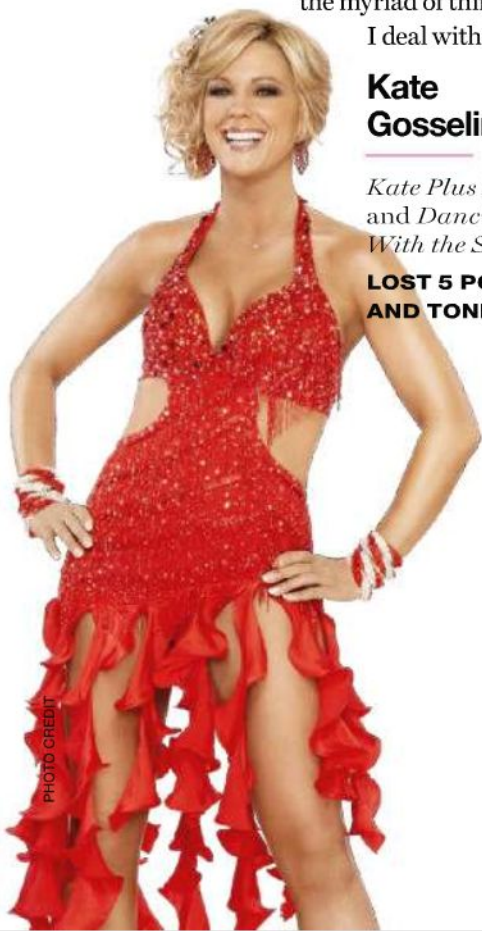
LOST 25 POUNDS

"Dancing With the Stars showed me that if I could 'find' six hours to dance seven days a week, I could get darn serious about running for one hour every day. And I will be eternally grateful to *DWTS* for that lesson, among many learned! I don't need a trainer to motivate me. The more stress I have, the more I *need* to work out. Running is the only healthy way to handle the myriad of things I deal with."

**Kate
Gosselin**

*Kate Plus Eight
and Dancing
With the Stars*

**LOST 5 POUNDS
AND TONED UP**



"I've learned that the key is portion control: You can have some of everything, you just don't want to go crazy. And I cook healthier, like the pasta dish I make for me and my fiancé. I saute zucchini, onions, tomatoes, broccolini, spinach, garlic, and spices together. Then we add ground turkey and put it on top of whole wheat pasta. It's delicious and supergood for you."

Sara Rue

*Shedding for
the Wedding*

**LOST 50 POUNDS
WITH JENNY CRAIG**



KIM'S FAVORITE BUTT MOVE

A side lunge how-to from her trainer, Gunnar Peterson:

- **A** Stand with feet hipwidth apart, holding light dumbbells or water bottles in each hand.
- **B** Take a big step out to the side with your left foot and lower into a squat, bending your left knee but keeping your right leg straight. Tap weights to the floor, one on either side of the left foot.
- **C** Straighten up and step back to starting position, then switch sides and repeat. That's one rep; do two sets of 20 reps.

**Kim
Kardashian**

*Keeping Up
With the Kardashians*
LOST 12 POUNDS





That's one way to
put all those
self-help books to
good use.



TAKE THE HEALTHY-RELATIONSHIP QUIZ!

When was the last time you and your guy _____?

You know the cycle—eat, work, make sure the kids are breathing, sleep, repeat. And you know that you have to break out of it to remember you're still alive and in love. First step: Get in bed together, pull out this quiz, and start laughing (see question #1)!

When was the last time you and your guy really laughed in bed?

- A** Last night—sex should always be fun.
- B** Last week.
- C** Maybe once last month.
- D** Who has time for that? We do the do and go to sleep.

“Laughter is sexy and can enhance your sense of intimacy,” says psychotherapist Tina B. Tessina, Ph.D. Research backs her up: Studies show that when a woman laughs, the same zones in her brain are excited as when she has sex. So, play tickle monster for foreplay. Or whatever. Why not?

52%

of couples who took part in a recent survey said laughter is more important to a happy marriage than quality of sex. We say, kill two birds with one chuckle!

When was the last time you and your guy
dreamed about hitting it big?

- A** We're always mentally adding rooms to our fantasy house.
- B** Every year at tax time.
- C** Whenever the Powerball jackpot rivals the national deficit.
- D** Never—why think about stuff that won't happen?

"Fantasizing about financial freedom helps you realize what your life and relationship could be like if you took real steps to shore up your finances," says money expert Manisha Thakoor, coauthor of *Get Financially Naked*. "Discussing big goals twice a year is good, but follow those conversations up with actions that have high odds of getting you there, like figuring out how to find an extra \$50 a month to pay down outstanding debt."

When was the last time you and your guy
cooked a meal together?

- A** Last night—and most nights.
- B** Couple weeks ago.
- C** Back in the summer, when he showed off his grill skills.
- D** Ha! He doesn't even know where the kitchen is.

A romantic dinner at home can be much steamier than one at Chez Schmancy, promises Claud Mann, chef and cohost of the TBS show *Dinner and a Movie*: "At least once a month my wife, Perla, and I make a new recipe together. We throw on some mood music and begin with a toast." But it's not about getting all Iron Chef—spaghetti, roast chicken, anything is fine. "It's simply about doing something sensual with the person you love," Mann says. "It might just remind you why you hooked up to begin with. And if that happens... well, the dishes can wait until the morning."

When was the last time you and your guy
danced?

- A** Last night when the kids went to bed.
- B** Last month. We get down when we go out.
- C** This past spring at somebody's wedding.
- D** At our wedding—the one and only time.

"Dance activates the brain's pleasure circuits," says dance/movement therapist Christina Devereaux. "As a nonverbal way of saying, 'I'm with you,' it builds empathy between partners." Anna Trebunskaya, one of the pros on *Dancing With the Stars* (her husband, Jonathan Roberts, is on the show too), agrees. "When Jonathan and I competed together professionally, sometimes we'd have to perform when we were angry at each other. Most of the time, afterward, we wouldn't even remember why." And you don't have to be pros, or even good dancers, she adds: "Just a little twist and shake around the kitchen can make you feel closer."

When was the last time you and your guy
had a friendly face-off?

- A** We arm-wrestle every night over the remote.
- B** Last week on family game night.
- C** Maybe last year.
- D** Never—it seems wrong to compete with my husband!

Competition—in judicious doses, of course—keeps life exciting for the WNBA's Candace Parker and her husband, Shelden Williams of the Denver Nuggets. "We have cook-offs where guests decide whose meal is better," Parker says. "We used to have shooting contests to decide who was on diaper duty. It's fun and keeps us going." And for the under 5-foot-5 set, there's always Wii. "Any playful competition works out aggression harmlessly," says psychiatrist Scott Haltzman, M.D.

When was the last time you and your guy
held hands?

- A** Every day, or whenever we're out and about.
- B** Last week.
- C** Last month on date night.
- D** When was our first kid born, again?

In one study, couples who engaged in "warm touch"—nonsexual contact such as holding hands or cuddling—for 30 minutes three days a week for a month had higher levels of the bonding hormone oxytocin than when they began. Even better, "Holding hands can stimulate your hormonal systems to sync up, making the sexual connection easier," Tessina says. "And the more often you resync, the faster it will start to happen."

When was the last time you and your guy
double-dated?

- A** Last night: We always go out with other couples.
- B** Within the last month.
- C** College. (Hey, Deb and Smokie!)
- D** Never—we like to keep girls' night and guys' night separate.

Answer A is an extreme—you should crave time alone together sometimes—but B is healthy. Studies show that couples socialize together less often than they did 30 years ago because they have fewer shared friends, but we should all try to reverse that trend. "We see another side of our spouse when we're out socially," says Dana B. Myers, founder of the sexy lifestyle line Booty Parlor. "Maybe he makes everyone laugh and you remember how dynamic he is, or you hear a new story. It reminds you that there are still things to discover about each other."



Broad daylight.
Clothes on. Still sexy!

When was the last time you and your guy
said "I love you because..."?

- A** Every day. (You're *that* couple, aren't you?)
- B** Within the last month or two.
- C** On our anniversary... it was in the card.
- D** He should know that without my telling him, right?

A quick "Luv ya" on your way out the door is fine most days, but "giving your partner an actual, specific, reason—'because of how great you are with the kids, or the way you touch me,' reminds them how much they mean to you," says clinical psychologist David Wexler, Ph.D. When in doubt, add more detail!

When was the last time you and your guy
really made out?

- A** Last week or so. We love to kiss.
- B** Um, this morning? We're hot like that.
- C** Last month when we had a babysitter.
- D** Around the turn of the last century.

"When a woman tells me she and her husband have lost their spark, I ask if they still make out," Myers says. "Over time, we forget that intimacy includes a whole menu of small moments, touches, and interludes. So grab him when he's not expecting it and give him a deep kiss." Quiz over. Pencils down. But that's your homework!

When was the last time you let your guy
run the show?

- A** Constantly: It's easier to let someone else do the heavy lifting.
- B** Last month, on "Daddy Decision Day."
- C** I hand over the reins a few times a year.
- D** Our insurance won't cover that kind of risk-taking.

Giving one spouse all the power can run your relationship off the road, says *Supernanny* Jo Frost: "It's important to be as comfortable in the passenger seat as you are at the wheel. Becoming a dynamic duo as parents and partners is about give and take, not controlling everything. It's about compromise." The family gets some freedom—and you each get a few days off!

81%

of men say they try
to be romantic at least
somewhat often. But 23%
say their partners don't
recognize their efforts!
Ladies, let's change that.



Nº 1

THE ANTI-SMOKY EYE

Pale, pretty shadows were huge on the spring runways—such a bright spot amidst the usual sea of superdark eye makeup. To try the trend, use the pastel color you've been ignoring in your shadow quad: "It acts as a perfect backdrop for high-impact lashes," says Troy Surratt, who did the makeup for this story. On our model: Rimmel Glam'Eyes Mono Palette in Precious Rose, \$3.49; MAC FalseLashes mascara, \$18.

11 for '11

It's a NEW YEAR, and plenty of magazines are going to claim you need a new wardrobe. But *they* don't have to pay for it! WE SAY, you can update everything you own with just a few key buys and cool beauty ideas. HAPPY 2011!

No 2

BIG, SLEEK JEWELRY

To get the most bang for your buck, jewelry-wise, choose pieces like these with geometric shapes, clean edges, and lots of shine. They make a major statement without being at all fussy. Ring, MiMi by Sorrelli, \$55. Cuff, Trina Turk, \$176. Dress, Rachel Gilbert, \$275.



No. 4 ▶

AN IMPERFECT CENTER PART

After so many seasons of the deep side sweep, a center part feels like the freshest, prettiest idea ever. Just avoid the ruler-straight Susan Dey thing; let strands stray onto either side for a softer effect. "This looks good on everyone," said our on-set hairstylist, Tim Rogers. "It's relaxed but still sexy."

No. 3

ANYTHING LAVENDER

This deliciously girly color is ultra-sophisticated when it comes in a classic silhouette, like a belted trench. Think of it as a few degrees sweeter than pale gray, but just as versatile. Trench, Lands' End, \$140. Blouse, H&M, \$39.95. Skirt, Strenesse Blue, \$330. Shoes, Boutique 9, \$120.





Nº 5

HIGH-HEELED LOAFERS

An iconic shoe gets the bombshell treatment—it's like the love child of L.L.Bean and Victoria's Secret! They'll lend a hip prepster air to your work outfits *and* let you play sexy librarian on Saturday night. Heels, Charles by Charles David, \$135. Dress, Mackage, \$450.



Nº 6

TROUSER JEANS

Everyone let out a collective sigh of relief: The season's biggest denim trend is grown-up, easy to look great in, and still supercool. The slightly higher waist (it sits right below your belly button) eliminates muffin top, and the straight legs will make yours look miles long. Jeans, Loft, \$70. Blouse, Lafayette 148 New York, \$378. Belt, Streets Ahead, \$115. Bangles, Pono, \$225 each. Clogs, Coach, \$178.



No 7

UNGLOSSED LIPS

If your lips chap at the mere thought of matte lipstick, rest easy: "The newest formulas have moisture and a hint of reflection, so your mouth looks modern and kissable," Surratt says. And nearly any lipstick can be made to look and last like a matte—just pat it on with your finger until the shine fades. On our model, superhydrating CoverGirl Lip Perfection Lipstick in Spellbound, \$6.50.

No. 8 GRAPHIC- PRINT DRESSES

Punchy? Yes. Playful?
Yes. Wearable?
Absolutely! These
prints come in
silhouettes to suit any
figure, and you can
skip the jewelry—
they're *that* fun.
Dresses, from left:
Trina Turk, \$298;
Shoshanna, \$350.





Nº 9

FULLER, LONGER SKIRTS

The miracle of this swishy, feminine A-line? It's a shape that flatters every body type; ditto the just-covering-your-kneecap length (just be sure to wear it with heels). Let the choir sing "Hallelujah!" for ladylike looks. Skirt, Jones New York, \$129. Blouse, Leifsdottir, \$198. Belt, Michael Kors, \$225. Heels, Enzo Angiolini, \$89.

Nº 10

GRAYNAILS

We've found the happy medium between matte black nails (who wants to look *dead*?) and too-precious pink ones: a gorgeous, elegant shade of gray. Finish off this new neutral with a high-gloss topcoat—your nails should still seem wet. On our model, CND Colour in Asphalt, \$9; Sally Hansen NailShine Miracle 10 Day Top Coat, \$7.95.

Nº 11

A FLASHDANCE-STYLE SWEATER

You don't have to be a sexy dancer/welder to pull off this piece. In fact, it plays up the one body spot that's gorgeous on every woman—the shoulder. If you've got plans, don't let your guy see it until you're in the car... or just be a little late. Sweater, The Limited, \$70.

See shopping guide, last pages, for details.



“I had the cancer no one talks about”

After a devastating diagnosis and major gynecological surgery transformed author Darci Picoult's body, she wondered whether anything—her marriage, her sex life, her relationship with her daughters—would ever be the same. It wasn't. She came through stronger, more outspoken, and more intimately connected to the people she loves.

It began with a bump. The size of a pinhead. Innocuous. An innocuous little pinhead of a bump on my vulva. Given that my gynecologist said the bump was probably nothing, I laughed it off. Which, in turn, made my bump mad. Very mad. It wanted my attention. And so it grew. I smeared it in medicine. It grew more. More medicine. More growth. Hanukkah came. Then Christmas. A war raged between us. I went to battle in the middle of the night with salt baths and creams. Prayed for its departure as my children lit menorah candles and friends came and went, toasting the new year.

My resolution that year, 2009, was to go back to my gynecologist. I moved my feet slowly into the stirrups and pointed to the bump. Her face grew very still: “How did this happen?” An hour later I was getting blood drawn for surgery to remove it.

This all felt a little too familiar: My first gynecological surgery was at age 12, after I discovered a dark spot on one of my labia that turned out to be a pre-cancer. It was removed, along with part of my inner lip, and I was fine. But then the news came out that DES—an anti-miscarriage drug that my mother and millions of other pregnant women used to take—increased daughters' risk of vaginal cancer, and scrutiny on that part of my body increased. Twice-yearly Pap smears and frequent biopsies became a “normal” part of my teens.

The intense focus on that part of my anatomy provoked me to write a play called *My Virginia* (my childhood name for my vagina), which explores the effect of DES on mothers and daughters. Prior to its debut, a photographer who resembled James Taylor was sent to take my photo. After he snapped the picture, I smartly asked him out. A few years later, we married. Larry





and I traveled across the world as I performed *My Virginia*. We met women and men who would talk about the most personal parts of their bodies and lives, which, in turn, fed *our* talks. This intimacy defined our marriage and our sex life. It's what made us *us*. In 1998 and 2002, that "us" expanded to include our two adopted daughters, Olivia and Mollie.

The night before my surgery, I tell the girls about the bump and that my doctor wants to remove it. We are seated around the dinner table, and Olivia, then almost 11, raises her fork, as if it were a hand, wanting to know the exact location of the spot. "It's next to my vagina, sweetheart," I say as if it were my toe or cheek or belly. "Can we please not talk about this now? I'm trying to eat," says Mollie, then 7. "But I want to

see it," says Olivia, shooting Mollie a you-are-too-young-to-understand look. I swallow hard. "You don't need to see it, Sweet—" Mollie jumps up, rips off her pants, a sudden change of heart: "Show her where it is on me!" Larry speaks up, finally, asking Mollie to sit down and finish dinner. She pulls up her panties, returns to her seat, and slurps a noodle.

Although the word *cancer* has been part of Larry's and my dialogue since we first met, we are still shocked by the biopsy results we get 10 days later: The bump on my vulva was malignant. After consulting several doctors, we finally meet with an oncologist whose measured approach makes me feel a little less panicked. His voice is calm and direct: "I think it's a two-step process. First, there are several more areas of abnormal tissue that need to be biopsied. What we find will tell us what to do next. If any of the new lesions are malignant, then we're talking about a much more

The world revolves around sex. But what

invasive operation. I don't want to touch the clitoris, but we may have to." The *clitoris*? I glance at his resident, a young woman, who stares quietly at me. As does Larry. "Whatever needs to be done, I'll do," I say, determined to be a warrior despite wanting to run from the room, a mix of fear and shame at my heels.

A week after the biopsies, I'm waiting in an exam room in my oncologist's office when he pokes his head around the corner. "Great news, pal," he says. "All the biopsies came back negative. No cancer." I throw my arms up and shout, "Yes!" eager to jump off the table and forget this ever happened. But it's not so simple; I have still more strange spots. He asks me to think of my vulva as a garden, the abnormal areas being dandelions: "We may need to pull those weeds later, but for now, you're cured." That night Larry and I sit down to dinner and a bottle of wine to celebrate my cured garden. We talk about everything *except* my vulva, given that it has usurped our conversations for months. Then we clean the dishes, check on the girls, who are fast asleep, and head into the bedroom. We haven't made love in more than six weeks. The excisions had left me feeling mutilated and undesirable—but the craving to be touched and to touch overcomes my nervousness. We start tenderly, Larry questioning every move: "Does this hurt?... This?" I assure him I'm okay, despite a slight burning. I need to know I can do this, have this physical connection to my husband and to myself.

Nine months later, I discover a new growth. After a biopsy shows this one is pre-cancerous, my oncologist recommends a vulvectomy—a complete removal of the vulva. He will remove what is left of my labia, plus a small portion of the entrance of the vagina and tip of the urethra. Then he'll reconstruct the area using tissue from my thighs. The hospital stay will be a few days, recuperation is six weeks.

I tell Mollie and Olivia that I need more surgery, and we plan special mommy-daughter days so I can answer their questions. Mollie opts for Tim Burton's *Alice In Wonderland* and then dinner at a neighborhood pub that makes homemade mac and cheese and Brussels sprouts, her new passion. We talk about the movie, the yummy fried chickpeas they place on our table, and then my surgery: "What are they going to do *now* to your vagina?" I explain that my doctor is removing skin from the area outside of the vagina called the vulva. Mollie looks confused. Then lifts her little finger. "You mean if this is your vagina, your nail is your vull-vaa?" She giggles. I laugh too and nod, impressed by her analogy. "Mol, I want you to know you can say anything you want to anyone about this," I tell her. I wait for her to respond. "Okay?" Mollie flattens a chickpea with her hand. "Mom, I would never say anything. Especially to the boys in my class. All they talk about are their balls." I gulp my water. And continue: "As soon as I'm able to, I'll start walking you to school again." A long pause follows. "Mom? I don't really want you to take me to school if you're walking funny. It'll be embarrassing." Understood.

Olivia opts for a day at the mall (the girl loves to shop), then a

Japanese restaurant for sushi. After we order, she leans forward: "Mom, I have to ask you something really personal." I take a breath, "Anything you want." "Do you think I'll get my period this year?" So *that* was it. "I do, but I can't predict." "Just guess. When? Next month? In two months?" This becomes the centerpiece of our discussion for the night—her budding sexuality, need for a bra, and curiosity over what is happening in her body. Any questions about what is happening in mine are put aside until dessert is served. "Mom, do you think you're going to need pads after your surgery? If you do, can I use some of them?" I'm relieved that what I'm going through with my most intimate parts doesn't seem to have made her afraid of her own—and so happy that Olivia is centered on herself right now, as she should be.

As the day of the surgery approaches, my nerves are keeping me up at night. How will I be able to walk? Sit? Have sex—ever again? What will I look like? Will Larry even want me anymore? My panic escalates and I call my doctor, who talks me through the surgery again, gently telling me what he is going to do—and why. His final words echo in my mind: "Remember, you had cancer."

I know that after surgery, sex will be off-limits for six to eight weeks, but it's everything I don't know that propels my desire to make love now. I worry about whether the reconstruction will work, and if I'll still have sensation. I get to keep my clitoris, but what if nerves are cut? I shove these thoughts beneath the bed and climb in next to Larry, eager to grab hold of him and not let go.

In the waiting room the morning of the surgery, *The View* comes on the television—Courtney Love is the guest. So there I sit, watching a former stripper sing, moments before having my vulva removed. Thoughts boomerang inside me: Every story line on TV revolves around sex. But what about those of us who *can't* make love? What if your sex drive is in reverse because in a place that should be divinely pleasurable, you feel pain? Isn't there anything that defines intimacy beyond throbbing bodies? Everywhere I look makes me feel less like a woman. And yet. I know there is something bigger, something more. My "womanhood" has nothing to do with my vagina, it is in *me*—in my nurturing of Mollie and Olivia, my work as a writer, my love of

VULVA. THERE, WE SAID IT. NOW HERE'S

1. Exactly where it is! We use so many euphemisms, from "down there" to "va-jay-jay," that it's no surprise many women aren't sure what the vulva is. Answer: the inner and outer labia, clitoris, and pubic mound, explains David A. Fishman, M.D., director of gynecologic oncology research at Mount Sinai School of Medicine in New York City.

2. How to tell if something is wrong. Vulvar cancer is relatively rare—about one in 387 women will get it in her lifetime, compared with one in eight for breast cancer. But survival rates are lower, around 75 percent, so it's important to catch it early, Fishman says. "Knowing your body is critical," he says. Some signs of potentially

about those of us who *can't* make love?

Larry. I repeat this to myself as I see my doctor approach.

"It went great," my doctor reports, with a deeply dimpled grin, once the surgery is done. He requests a mirror from the nurse and places it between my legs. I lift my head slowly, terrified by what I am about to see. There are lots of blue stitches—but my vulva looks almost normal. I look at my doctor, unable to speak. A moment later, Larry walks in. The doctor hands him the mirror, "Take a look at your wife!" The room goes silent. Larry puts down his backpack and leans in. His left eyebrow pops up, and he smiles. For days, doctors and medical residents drop by to see me. "Fascinating. Unique. Of real interest." Reviews I would want for my plays, but they're talking about my vulva.

I'm able to go home a few days later, but walking is still difficult (imagine John Wayne on downers)—and sitting is only possible with the help of a large blue pillow I lovingly call my "cloud." Mollie is the first to ask to see the results of my surgery. For years I had worked to create a dialogue of openness around my body and the girls', one without shame or embarrassment or fear. If I say no, won't she always wonder what I was hiding? Still, how many 8-year-olds have seen their mother's vagina that close up? Particularly one with stitches? "Okay," I say, my stomach in a knot. I lift up my skirt and pull down my underwear (extra large for comfort). She giggles. "Looks like a vagina to me!" Then, without taking a breath, "Do you have any gum?" Olivia's request comes when I'm stepping out of the shower later the same day. "Wow, you have blue stitches. Other than that it looks just like mine."

When I check myself, I see something different. Though on first glance my new lips appear remarkably normal and healthy, there are no layers or definition. And there is a clear view straight into my vagina and even of my cervix. I am both fascinated to glimpse the inside of me so clearly and devastated to look so exposed.

Almost four months after the vulvectomy, my doctor gives me permission to resume all activities. Given that I have already gone back to bathing and running, I know that means sex. I call Larry immediately and set an appointment for that night. I feel a mix of excitement and nerves—more than 20 years into our relationship, I can't help but smile at these



The author has always tried to create a sense of openness around the female body with her daughters, Olivia, now 12 years old, and Mollie, 9.

emotions. After a good deal of laughing and kissing—mostly laughing, both of us acting like teenagers—Larry turns out the light. My stomach tightens in anticipation of the first touch. I feel something, muted but there, in my clitoris. I take a breath and try to relax, desperately wanting my body to work. His desire intensifies, as does mine. For the first time in years, there is no discomfort, no burning, no pain. *This is great*, I think, *great*. Then my heart stops: I don't hurt, but I don't feel much of *anything*. There's no pressure or stimulation. I am deeply connected to him mentally and emotionally, but physically I am numb, void of sensation.

Will physical feeling return? I don't know. Will my clitoris remain cancer-free? This too I don't know. What I do know is this: Though I have lost a part of my body and certainty about my sexual future, I gained a closeness to my girls and to Larry that has empowered us as a family. This year has redefined who I am as a mother, a wife, and a woman. Mollie and Olivia know they can ask me anything. Larry knows he and I can meet the scariest of times head-on. No matter what happens (or doesn't) in the bedroom, we will always have intimacy, strength, and love. **R**

Darci is a Sundance playwriting and screenwriting fellow whose work has been produced regionally and in New York City. Her play My Virginia is available at amazon.com and on iTunes. Her latest film, Mother of George, is slated to start production soon, with Kerry Washington attached to star.

LARRY FORD.

WHAT YOU NEED TO KNOW ABOUT IT.

cancerous changes:

- Sores or wartlike bumps that don't heal after four days.
- Skin that is thicker or a different color than the skin around it (tiny yellow dots on the inner labia are an exception—those are most likely just sebaceous glands).
- Dark, irregularly shaped moles or spots.

3. How to protect yourself.

Get a yearly pelvic exam, even if you're not due for a Pap, and ask your doctor about a human papillomavirus (HPV) test. It's estimated that 40 percent of vulvar cancers are related to HPV—the virus that causes most cases of cervical cancer. For more info, go to redbookmag.com/cancertalk. —AMY LEVIN-ESPTIN

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Need some diet inspiration? Ditto. So we asked chefs at America's top spas for their most popular dishes and skinniest cooking tips. Steak, chocolate, Mexican food, yay! By Frank P. Melodia

← (from previous page)

Filet of beef with tomato, red onion, and basil salad

Miraval Arizona Resort & Spa, TUCSON, AZ

"People mistakenly assume that steak is a diet no-no. Tenderloin filet, New York strip, and top sirloin are all healthy choices."

—CHEF CHAD LUETHJE

Prep time: 20 minutes

Cooking time: 15 minutes

- 1/2 cup balsamic vinegar
- 4 large plum tomatoes, seeded, julienned
- 1/2 small red onion, julienned
- 1/4 cup fresh basil leaves, julienned
- 1/2 tsp each kosher salt and freshly ground pepper
- 4 (4-oz) beef filet steaks, about 3/4 inch thick
- 1 Tbsp olive oil
- 1 oz fresh goat cheese, cut into 4 thin slices

1. Bring vinegar to a boil in a small saucepan. Reduce heat to low and

simmer until it's reduced by half and becomes thick and syrupy, about 8 minutes.

2. In a medium bowl, toss tomatoes, onion, basil, and half of the salt and pepper; set aside.

3. Season beef with remaining salt and pepper. Heat oil in a large nonstick skillet over medium-high heat until hot. Add steaks and cook 2 minutes per side, until seared. Reduce heat to medium and cook another minute per side for medium-rare. Transfer steaks to a plate and let rest 5 minutes.

4. Meanwhile, toss tomato salad with 1 Tbsp of the balsamic syrup. Divide salad among four plates. Place a steak on top of each salad and top with a slice of goat cheese. Drizzle remaining balsamic syrup over steaks.

Makes 4 servings.
Each serving: 246 cal, 14g fat, 22g protein, 10g carb

Chef Chad's skinny tip

When you're making tuna or chicken salad, mix one part low-fat mayo with three parts nonfat plain yogurt that's been strained for 20 minutes. The salad will contain 75 percent less fat.



Shrimp a la diablo

Rancho La Puerta, TECATE, MEXICO

"Guests love that this dish is so different from how restaurants typically serve shrimp: swimming in butter and lemon juice."

—EXECUTIVE CHEF GONZALO MENDOZA

Prep time: 15 minutes

Cooking time: 10 minutes

- 1 Tbsp olive oil
- 16 jumbo shrimp (1 lb), peeled and deveined, with tail shells intact
- 2 medium leeks (white and light green parts), thinly sliced (about 1 cup)
- 1 Tbsp chopped garlic
- 1/3 cup fresh lime juice
- 1 Tbsp chopped chipotle chiles in adobo sauce
- 1/4 cup tequila

- 1 cup diced tomatoes
- 1 cup fresh cilantro, chopped
- 2 Tbsp unsalted butter

1. Heat oil in a large nonstick skillet over medium-high heat. Add shrimp; cook, stirring, about 2 minutes.

2. Add leeks and garlic; cook, stirring until leeks start to soften, about 1 minute. Add lime juice, shaking pan to combine. When lime juice begins to boil, stir in chiles.

3. Remove pan from heat; pour in tequila. Return to heat; bring to a boil. Cook 2 minutes. Stir in tomatoes and cilantro; swirl in butter just until it melts. Serve immediately.

Makes 4 servings.
Each serving: 207 cal, 10g fat, 19g protein, 9g carb

Chef Gonzalo's skinny tip

When buying veggies, remember that the brighter the colors, the higher the level of nutrients. To retain all the good stuff, blanch them: Put veggies in a pot of boiling salted water for 2 minutes, then transfer them to an ice bath. Or sauté them for a few minutes in a hot skillet.

Pan-roasted chicken with peach-bourbon glaze

Lake Austin Resort,
AUSTIN, TX

“Alcohol is one of the best ways to add flavor to a dish without adding calories—plus, it burns off, so kids can eat it too. Try

bourbon, sherry, wine, or orange liqueur.”

—EXECUTIVE CHEF TERRY CONLAN

Prep time: 10 minutes

Cooking time: 15 minutes

- 4 (4-oz) boneless, skinless chicken breasts
- 1 Tbsp canola oil
- 1/2 cup finely diced onion
- 2 Tbsp bourbon

1/4 cup low-sodium chicken broth

1/2 cup All Fruit peach preserves

4 tsp chopped fresh mint

1 Tbsp fresh lemon juice

1 Tbsp cider vinegar

1. Sprinkle chicken with kosher salt and pepper. Heat oil in a nonstick skillet

over medium-high heat. Add chicken and cook 8 to 9 minutes, turning halfway through. Remove from skillet; keep warm.

2. Reduce heat to medium, add onions, and cook about 2 minutes, until browned. Add bourbon and let evaporate, 30 seconds to 1 minute, then add broth and deglaze

pan, scraping up any browned bits.

3. Add remaining ingredients and any accumulated chicken juices and simmer 1 to 2 minutes. Pour over chicken breasts.

Makes 4 servings.

Each serving: 244 cal, 6g fat, 23g protein, 23g carb

Chef Terry's skinny tip

🌿 If you really want to taste a meal, turn off the TV, silence all cell phones, and step away from the computer. Concentrate only on the food and the company you're with. When people plow through food, they don't enjoy it, and they don't feel satisfied. 🌿



Grilled salmon with soba noodles and ponzu sauce

*The Lodge at Woodloch,
HAWLEY, PA*

"Our guests love this dish because it's not super heavy but its balance of flavors leaves them feeling full."

— EXECUTIVE CHEF PETER SCHOTT

Prep time: 15 minutes

Cooking time: 30 minutes

Ponzu sauce

- 1 cup each orange juice and water or vegetable stock
- 3 Tbsp fresh lime juice
- 1 Tbsp soy sauce
- 1 tsp each honey and rice wine vinegar
- ½ tsp each grated fresh ginger and minced garlic
- ¼ tsp crushed red pepper flakes

Noodles

- 1 (8.8-oz) package dried 100-percent buckwheat soba noodles
- 1 cup shredded carrots

Salmon

- 4 (5-oz) skinless salmon fillets, 1 inch thick
- 2 Tbsp each soy sauce and honey, blended

Sliced scallion, for garnish

1. Ponzu sauce: Bring sauce ingredients to a boil in a medium saucepan; reduce heat to medium-low and simmer 20 minutes, or until reduced by half, about 1¼ cups.

2. Noodles: Bring a large pot of water to a boil. Add soba noodles and simmer, uncovered, 6 minutes or until just tender. Place carrots in a

colander; drain noodles over carrots in colander, then toss together.

3. Salmon: Heat a nonstick stovetop grill pan over medium heat. While noodles cook, place salmon on grill pan, skinned side up; grill 4 minutes. Turn fillets; brush with soy-honey glaze. Grill second side 4 minutes for medium doneness.

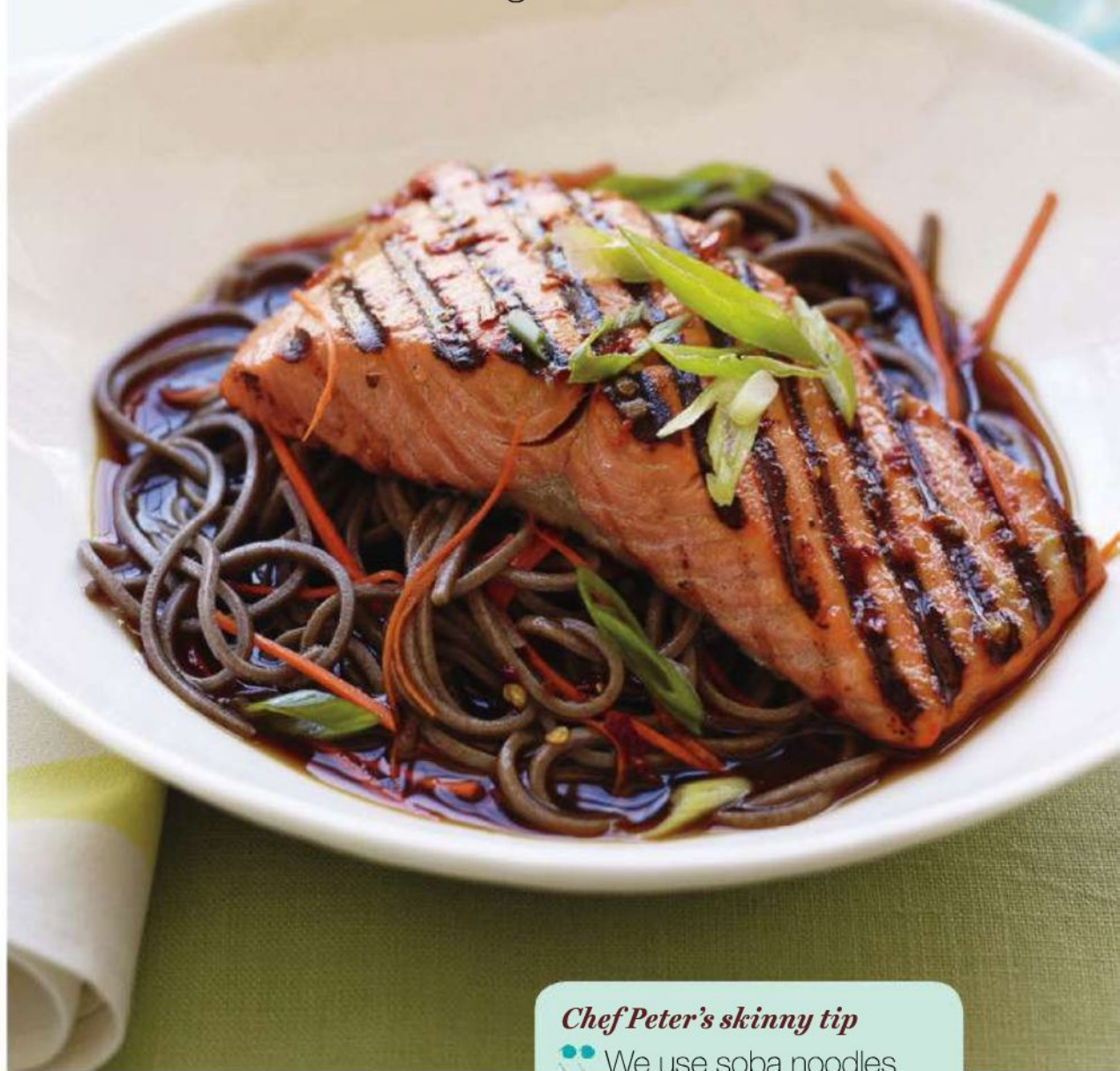
Brush on any remaining glaze.

4. To serve, divide soba noodles among four shallow bowls and top each with a salmon fillet. Pour ponzu sauce around noodles. Garnish with scallions.

Makes 4 servings.

Each serving: 499 cal, 6g fat, 45g protein, 71g carb

"The chili flakes in this dish add some heat and make it taste richer without adding extra fat or calories."

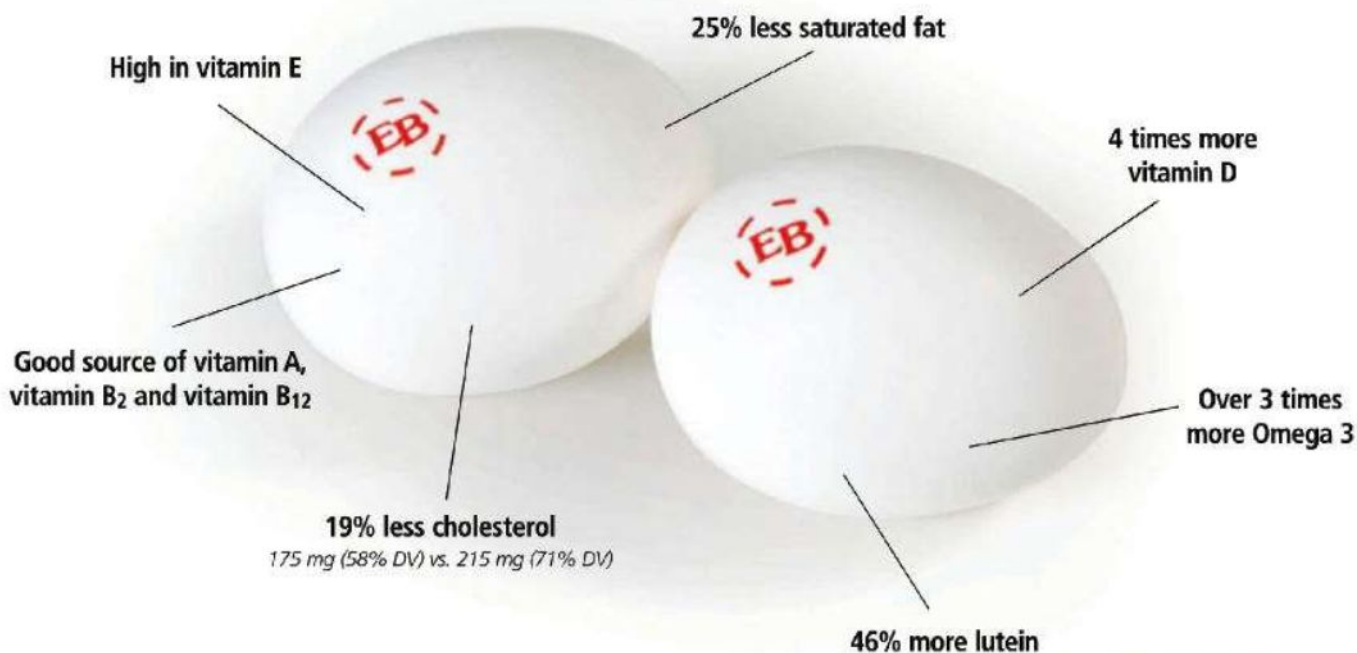


Chef Peter's skinny tip

💡 We use soba noodles because they're made of buckwheat and have more fiber, protein, and minerals than white pasta. Experiment with whole grains; try replacing white rice with brown rice, quinoa, bulgur, whole-wheat couscous, or barley. And use buckwheat flour to make pancakes. 💡

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Cheese enchiladas with tomatillo sauce

Canyon Ranch, TUCSON, AZ

"People can't believe Mexican food can be healthy, but this dish is proof: It still tastes great with half the typical amount of full-fat cheese. I prefer to use less of the 'real' product rather than using something reduced-fat or 'light.'"

—CHEF SCOTT UEHLEIN

Prep time: 20 minutes
Cooking time: 30 minutes

Cabbage salad

- 2 cups finely shredded green cabbage
- 4 large radishes, halved, sliced
- 1 Tbsp each chopped cilantro and fresh lime juice
- 1/2 tsp kosher salt
- Freshly ground pepper

Tomatillo sauce

- 1 lb tomatillos, husks and stems removed, washed
- 1 jalapeño chile, seeded, chopped
- 2 Tbsp chopped fresh cilantro
- 2 tsp each minced garlic and lime juice
- 1/2 tsp each dried Mexican oregano and kosher salt

Enchiladas

- 1 1/2 cups shredded cheddar cheese
- 1 cup chopped red onion
- 8 corn tortillas
- 1. **Cabbage salad:** Toss all salad ingredients in a medium bowl; refrigerate.
- 2. **Tomatillo sauce:** Heat oven to 425°F. Coat a baking sheet with cooking spray. Place tomatillos on sheet and roast 12 to 15 minutes

or until soft. Transfer to a blender with remaining sauce ingredients; blend until smooth. Reduce oven temperature to 400°F.

3. **Enchiladas:** In a bowl, combine 1 1/4 cups cheese and the onions. Lay tortillas on a flat surface. Place a heaping 1/4 cup of the cheese mixture onto each tortilla. Roll up, burrito-style. Lay enchiladas in a row in an 8-inch-square baking dish. Pour tomatillo sauce over enchiladas; top with remaining shredded cheese. Bake 15 minutes, or until cheese is melted.

4. Drain any liquid from cabbage salad. Serve with enchiladas.

Makes 4 servings.
Each serving: 354 cal, 17g fat, 16g protein, 39g carb



Chef Scott's skinny tip

When you pour oil, it comes out at a rate of 1 tablespoon per second—that's 90 calories a glug. Instead, keep it in a spray bottle and spritz your pan. Each spray equals 1/8 teaspoon.



Mocha mousse

Cal-a-Vie, SAN DIEGO

"If you're the kind of person who needs to have dessert, just go for a smaller portion and the right ingredients."

—EXECUTIVE CHEF JASON GRAHAM

Prep time: 10 minutes
Setting time: 30 minutes

- 4 1/2 tsp Kahlua
- 2 tsp instant-coffee granules
- 18 oz extra-firm silken tofu
- 6 Tbsp unsweetened cocoa powder
- 6 Tbsp agave nectar
- 2 tsp vanilla extract
- 1/2 tsp ground cinnamon

Dollop of whipped cream, raspberries, mint leaves (optional)

- 1. In a small saucepan, heat Kahlua over low heat. Add coffee and stir to dissolve completely, 30 seconds to 1 minute.
- 2. In a food processor, add tofu, cocoa powder, agave nectar, vanilla extract, cinnamon, and coffee mixture and process until thickened and smooth, 5 to 7 minutes.
- 3. Spoon into serving bowls and chill 20 to 30 minutes. Garnish each with whipped cream, raspberries, and mint leaves, if desired.

Makes 4 servings.
Each serving: 217 cal, 1g fat, 11g protein, 38g carb

Chef Jason's skinny tip

Here I used silken tofu instead of cream. It's low-calorie and flavorless. I use it in desserts that call for heavy cream and in creamy dressings.

The
old way.



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T.G.I.
Friday's Tuscan
Spinach Dip
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CALORIES
70 grams of fat

(NOT) SKINNY DIP You get the same portion of creamy spinach dip (a full cup!) with our recipe, but you'll save more than a Big Mac's worth of calories and fat.

WAIT! DON'T ORDER THIS...

REDBOOK'S spinach and artichoke dip

- 1/4 cup all-purpose flour
- 3 1/2 cups protein- and calcium-fortified nonfat milk, such as Skim Plus (it's thicker than regular skim milk)
- 1/2 cup finely chopped onion
- 1/4 cup finely chopped red bell pepper
- 2 tsp minced garlic
- 1 cup grated Romano cheese
- 1 cup (about half a 1-lb bag) frozen chopped spinach, thawed, squeezed dry
- 1/2 cup frozen artichoke hearts, thawed, chopped
- 1/2 tsp each kosher salt and freshly ground pepper
- 1 plum tomato, diced
- 4 oz tortilla chips
- A few shavings of Parmesan cheese, for garnish (optional)

1. Whisk flour and milk in a large saucepan until blended; stir in onion, bell pepper, and garlic. Turn on burner and bring mixture to a simmer over medium-high heat, stirring frequently, until it starts to bubble and thickens to the consistency of heavy cream, about 5 to 6 minutes.

2. Reduce heat to medium-low; whisk in Romano cheese and cook, stirring constantly, until melted.

3. Stir in spinach, artichokes, salt, and pepper, then simmer, uncovered on low heat, 5 minutes. Spoon into a serving dish. Scatter top with diced tomato and shaved Parmesan cheese, if desired. Serve with chips.

*Makes 4 servings.
Each serving (1 cup dip and 1 oz—about 9—chips): 327 cal, 11g fat, 17g protein, 43g carb
(Dip alone: 184 cal, 4g fat)*



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2 couscous quickies: Throw everything in one dish, devour, and clean up in seconds.

Smoked turkey salad

1. In a medium skillet, toast almonds over medium heat, stirring frequently, until lightly browned, 4 to 5 minutes. Remove from heat.
2. In a medium saucepan, cook couscous according to package directions.
3. Add couscous to a large bowl with all the ingredients and toss to combine.

Serving idea: Place salad on top of fresh arugula or spinach leaves.

Makes 4 servings.

Each serving: 506 cal, 15g fat, 26g protein, 67g carb



1 (10-oz) box plain couscous



$\frac{1}{4}$ cup slivered almonds



$\frac{3}{4}$ lb smoked turkey, diced



$1\frac{1}{2}$ cups cherry tomatoes, halved or quartered



$\frac{1}{2}$ cup pitted kalamata olives, sliced



$\frac{1}{2}$ cup bottled or homemade Greek salad dressing



$\frac{1}{4}$ cup chopped Italian flat-leaf parsley



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1 (10-oz) box plain
couscous



1 medium onion,
diced



1 red bell pepper,
seeded, diced



8 oz fully cooked kielbasa or
andouille sausage, cut
into diagonal slices



2 tsp Cajun or Creole
seasoning



2 (14.5-oz) cans
fire-roasted diced
tomatoes, with juices



1 lb large shrimp,
peeled, deveined,
and tails intact

Couscous jambalaya

1. In a large skillet, heat 1 Tbsp canola oil over medium-high heat. Add onions, bell pepper, sausage, and Cajun seasoning and cook about 5 minutes, until onions and peppers are softened and sausage is browned.

2. Stir in tomatoes and their juices. Reduce heat to medium-low, cover, and simmer 7 minutes. Meanwhile, cook couscous according to package instructions.

3. Add shrimp to skillet and cook about 3 minutes, until they're cooked through. Add couscous to skillet and stir to combine.

Makes 4 servings.

Each serving: 562 cal, 17g fat, 34g protein, 66g carb

—RECIPES BY BARBARA CHERNETZ



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THE SO-SIMPLE WAY TO SHOP (AND EAT) HEALTHIER

You totally planned to buy nothing but good-for-you stuff at the supermarket—but somehow you ended up with Oreos and Cheez Doodles (where did those come from?!). Next time, try this surprisingly simple trick: **Imagine a line drawn down the center of your cart, and designate one whole side for fruit and veggies and the other for everything else.** Shoppers who tried this in a recent study (they had a piece of tape laid through their carts to cordon it off) bought 102 percent more produce. What's more, they spent no additional dollars and bought less junk food overall. "The tape may have acted as a constant reminder, so buying fruits and veggies was always top of mind," says Collin Payne, Ph.D., a study coauthor and assistant professor of marketing at New Mexico State University in Las Cruces. Breaking out the duct tape may get you some strange stares at the grocery store—thankfully, drawing a mental divider works too. —KAREN ASP

Fill this side with produce...

...and put other items here



TOP: TUGIO MURATA/AMANA IMAGES/CORBIS. SHOPPING CART: BROCCOLI, BANANAS, TOMATOES, BREAD: ISTOCKPHOTO.COM. APPLE: CREATIVE CROP/GETTY IMAGES. SODA: KATL JUENGLER/STUDIO D. CHIPS: J MUCKLE/STUDIO D.

JANUARY'S SUPERFOOD: PERSIMMONS

See these tomato look-alikes? There are a ton of reasons you should get to know them better: Some early research suggests that the antioxidants in persimmons may help fend off heart disease and cancer. Plus, **one of the 120-calorie fruits has 25 percent of your daily fiber and 15 percent of the vitamin C you need**—and they're sweet! Pick one that's a deep orange or red with its green cap intact, says Phoenix-based dietitian Michelle Dudash, R.D. Then allow it to ripen on your counter for a few days, until it feels as soft as a water balloon (too-firm fruits have an astringent flavor that will make your mouth pucker). Add sliced persimmons to an arugula and pine nut salad, dice and stir into yogurt, or serve up something slightly fancier with the persimmon crème brûlée at redbookmag.com/recipefinder. —NICOLE YORIO



HUNGRY GIRL'S FOOD FIX

Smart new cocktails to try

Ring in 2011 with something delish and low-cal using this guide from Hungry Girl Lisa Lillien.

Sip it!

Exotic vodkas

Spirits flavored with blueberry, fig, and grapefruit are big right now—which is great, because you get sweetness sans calories. Try my yummy recipe at right.

Sake

At 120 calories per glass, wine is a safe bet, but for something a little more fun, try a sake! They range from fruity to robust, and have 160 calories per 4-ounce pour.

Bloody Mary

This classic is making a brunch comeback with new spicy jalapeño versions and pickle garnishes. And at 125 calories and a serving of veggies per glass, a bloody is a Hungry Girl's BFF.

Skip it!

Agave drinks

Watch out for trendy margaritas made with agave nectar. The sugary syrup is all natural, but it still has 60 calories per tablespoon. That can add up fast!

Champagne cocktails

Regular bubbly has only 80 calories per flute. Add caloric liquors and sugar, though, and one fancy cocktail can pack 250 calories.

Long Island iced tea

These jumbo drinks usually include five types of booze *plus* sugary sweet-and-sour mix. That can mean up to 780 calories in one 8-ounce drink. Gulp.

HG'S BERRY SPRITZER

- 1 SHOT BLUEBERRY VODKA
- 1 SPLASH PINEAPPLE JUICE
- 6 OZ CLUB SODA

Pour the vodka over ice in a tumbler, add just a splash of juice, then top it off with seltzer. Add a few berries or a wedge of pineapple as garnish and you've got a deliciously unique drink with only 120 calories. Cheers to that!



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SHOP THE ISSUE

ON THE COVER

ON BETHENNY: Silk **top:** Tory Burch. **Jeans:** Skinny Jeans. Vintage **bracelet and earrings:** House of Lavande. Makeup, all CoverGirl: **LashBlast Fusion** in Black. NatureLuxe **Foundation** in Sandstone. Simply Ageless **Sculpting Blush** in Plush Peach. **Lip Perfection** in Temptress. Hair, all Pantene: Fine Hair Triple Action Volume **Mousse**. Fine Hair Root Lifter **Spray Gel**. Fine Hair Professional Level Style Shaping **Hairspray**.

ON ALISON: Cardigan: Kors by Michael Kors. **Jeans:** Joe's Jeans. Makeup, all CoverGirl: **Liqui-LineBlast** in Black Fire. **LashBlast Fusion** in Black. Simply Ageless **Sculpting Blush** in Lush Berry. NatureLuxe **Gloss Balm** in Tulip. Hair, all Pantene: Curl Enhancing **Spray Gel**. Curl Defining **Mousse**. Curl **Heat Protection** and Shine.

ON PADMA: Cashmere **cardigan:** Bloomingdale's. **Jeans:** 7 For All Mankind. **Jewelry:** Padma Lakshmi Jewelry Collection. Makeup, all CoverGirl: **LashBlast Length** in Black. Smoky **ShadowBlast** in Purple Plume. Queen Collection **Lip Color** in Powderpuff Pink. Queen Collection **Liquid Makeup** in Almond Glow. Hair, all Pantene: Medium-Thick Silkening **Detangler**. Medium-Thick Flowing Body **Mousse**. Medium-Thick Anti Humidity **Hairspray**.

ALL THE TRICKS FOR... SPOILING YOURSELF FROM HEAD TO TOE

PAGE 48: Elizabeth Arden The Spa Collection **hand towels**, \$12.99; bedbathandbeyond.com.
PAGE 49: Bobbi Brown Vitamin Enriched **Face Base**, \$50; bobbibrowncosmetics.com. L'Occitane Ultra Moisturizing **Fluid SPF 20**, \$32; usa.loccitane.com. Jimmy Jane Afterglow Natural Massage Oil **Candle**, \$29; jimmyjane.com. Earth Therapeutics Purest Palm **Back Brush**, \$19.99; earththerapeutics.com.
PAGE 52: Aromatherapy Associates Miniature **Bath & Shower Oils**, \$50; aromatherapyassociates.com. Ole Henriksen African Red Tea Exotic **Body Scrub**, \$65; sephora.com. Jurlique Lavender Hydrating **Mist**, \$21; jurlique.com.

PRETTY FAST

PAGE 54: Ready to Wear Holiday Treasures **Makeup Set**, \$19.90; hsn.com. Avon Pro Color and Gloss **Lip Duo**, \$10; 800-FOR-AVON, avon.com. Kymaro Jet Flow **Styler**, \$39.95; ubuyez.com. Matté Elite Bare All **makeup remover**, \$13; rickysnyc.com. Elizabeth Arden Ceramide Cream

Blush, \$24; shop.elizabetharden.com. MAC Cosmetics Cham Pale Collection **Nail Lacquer**, \$13; maccosmetics.com. Miracle Skin **Transformer SPF 20**, \$48; miracleskintransformer.com. Own Plump Hydration Lip Therapy **balm**, \$14.99; ownproducts.com.

BEAUTY CALL

PAGE 57: MAC **Brush #187**, \$42; maccosmetics.com. Korres **Lip Butter**, \$10; korresusa.com. Aquage Uplifting **Foam**, \$28; aquage.com for salons. Living Proof **Thickening Cream**, \$24; sephora.com. DNA EGF Renewal Growth Factor **Serum**, \$145; dnaegfrenewal.com. SkinMedica TNS Recovery **Complex**, \$155; 866-TNS-0110, skinmedica.com. Neocutis Lumière Bio-Restorative **Eye Cream**, \$80; neocutis.com for info. Orly **nail color**, \$7.50; orlybeauty.com.

Q & TRIPLE A

PAGE 60: Clarins **Concealer Stick**, \$25; us.clarins.com.

11 FOR '11

PAGE 126: MAC False Lashes **mascara**, \$18; maccosmetics.com.
PAGE 127: MiMi by Sorrelli **ring**, \$55; sorrelli.com. Trina Turk **cuff**, \$176; trinaturk.com. Rachel Gilbert "Sara" **dress**, \$275; rachelgilbertshop.com.
PAGE 128: Lands' End **trench**, \$140; landsend.com (available January 29). H&M **blouse**, \$39.95; hm.com for stores. Strenesse Blue **skirt**, \$330; Searle, NYC, 212-750-5153. Boutique 9 "Quilo" **shoes**, \$120; shopbop.com.
PAGE 130: Charles by Charles David "Clasp" **heels**, \$135; endless.com. Mackage **dress**, \$450; mackage.com.
PAGE 131: Loft **jeans**, \$70; loft.com. Lafayette 148 New York **blouse**, \$378; Saks Fifth Avenue, lafayette148.com. Streets Ahead **belt**, \$115; 800-669-8218 for store info. Pono "Meteor" **bangles**, \$225 each; Debra's, Mobile, AL, 251-343-7463. Coach "Georgett" **clogs**, \$178; Coach stores, 866-262-2440.
PAGE 133: Trina Turk "Hijinx" **dress**, \$298; trinaturk.com. Shoshanna **dress**, \$350; Urban Chic, Washington, DC, 202-338-5398.
PAGE 134: Jones New York **skirt**, \$129; Lord & Taylor, 800-348-6940. Leifsdottir **blouse**, \$198; saksfifthavenue.com. Michael Kors **belt**, \$225; select Michael Kors stores, 866-709-5677. Enzo Angiolini "Cristle" **heels**, \$89; select Nordstrom stores.
PAGE 135: The Limited **sweater**, \$70; The Limited Stores, thelimited.com. CND **Colour**, \$9; cnd.com for salons.

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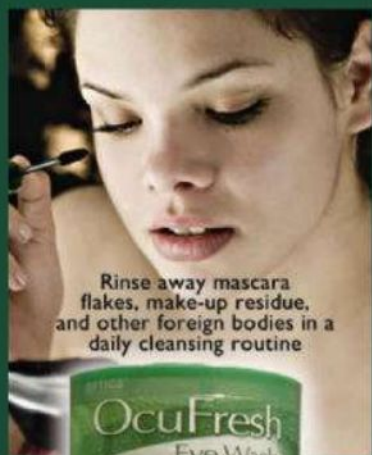
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CORRECTION: The photo of Tricia Spencer Potyka in "What Every Woman Should Know About Adoption" [November] should have been credited to Rachael Olan. We regret the omission.

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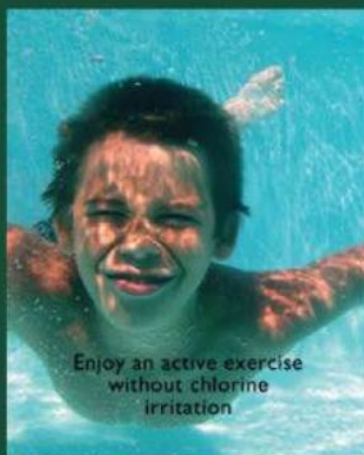
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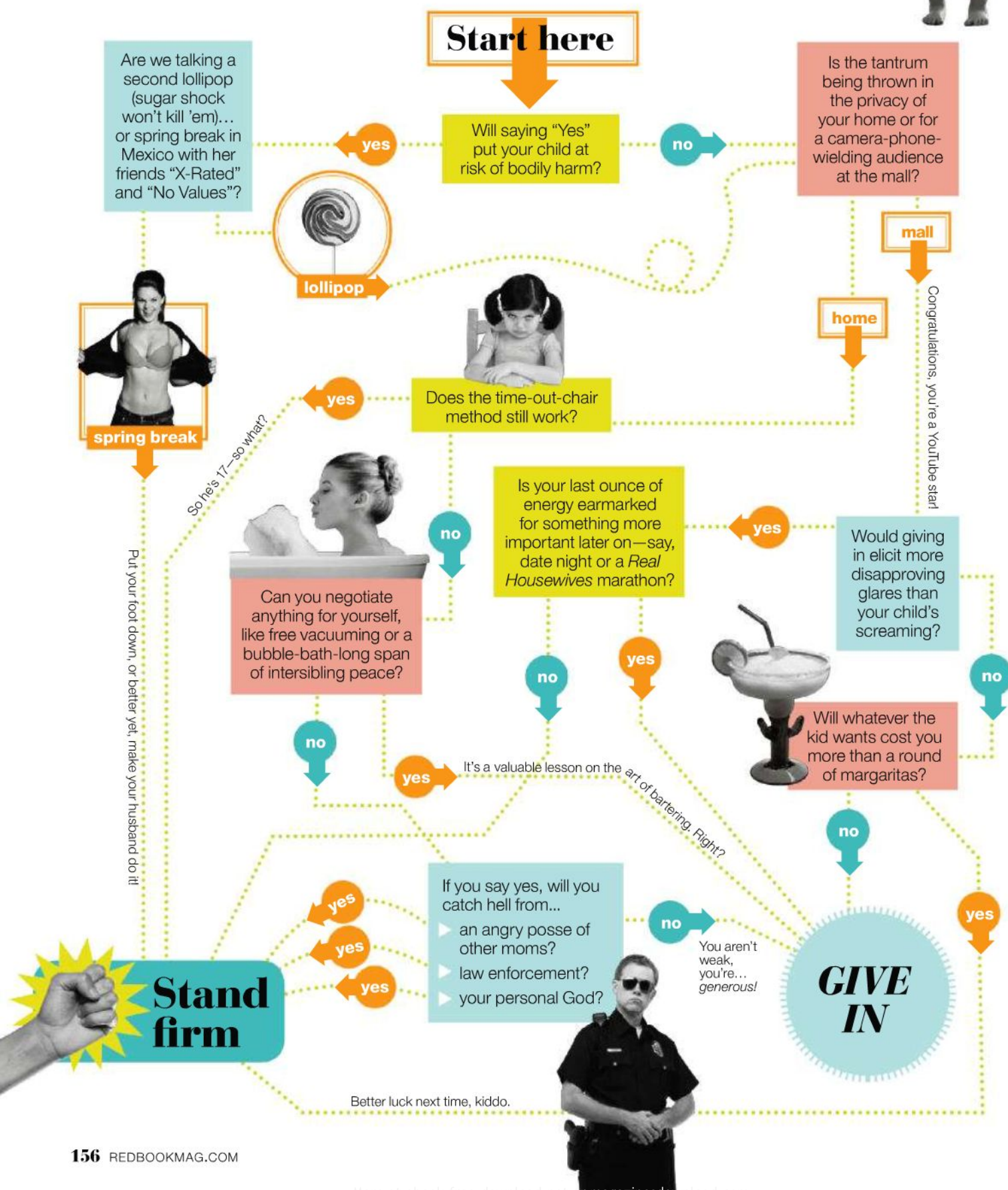
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